STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act

For reporting on
FFY 2021

Arizona

PART B DUE February 1, 2023

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

The Arizona Department of Education/Exceptional Student Services (ADE/ESS) has a system of general supervision that involves four main components: programmatic monitoring, dispute resolution, fiscal operations (including fiscal monitoring), and professional development/technical assistance. Programmatic monitoring assists public education agencies (PEAs) in implementing compliant special education programs that improve outcomes and provides support and technical assistance to improve student outcomes aligned to all OSEP indicators through annual site visit activities, monitoring activities, and review of risk analysis data. Dispute resolution allows for the community to notify the ADE/ESS that a PEA is or may be in noncompliance with the IDEA or a state special education requirement that identifies and corrects noncompliance. Fiscal operations administers IDEA entitlement funding and conducts single audit accounting reviews to ensure that items match submitted and approved budgets/uses. Finally, professional development and technical assistance are provided by every IDEA-funded area, take many forms, and are responsive to PEA requests and data generated through IDEA and education metrics from other sources. Special education administration is a system at both the SEA and PEA levels, not a collection of separate and isolated functions.

Additional information related to data collection and reporting

Number of Districts in your State/Territory during reporting year

739

General Supervision System:

The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.

Programmatic monitoring in Arizona is based on a six-year cycle that balances compliance and results-driven accountability (RDA) with a focus on improving outcomes for students with disabilities. Programmatic monitoring is structured around collaborative conversations and technical assistance (TA). All PEAs were involved in the following activities in the 2021–2022 school year:
• Technical assistance from ESS
• Review of indicator data, including student files
• Collection of student exit data
• Collection of post school outcomes
• Completion of Indicator 8 parent survey

In addition, some PEAs were involved in the following activities, depending on their cycle year:
• Annual site visits
• Review of policies and procedures
• Preparing for monitoring
• Differentiated monitoring activities
• Completion of individual and systemic corrective action

During the 2021–2022 school year, ADE/ESS continued the implementation of its yearly review of data related to special education. Compliance and results indicator data, PEA determinations, and annual site visit data continue to be reviewed annually by assigned program specialists in collaboration with PEA directors. The system supports practices that improve educational results for students with disabilities by using multiple methods to identify and correct noncompliance and by encouraging and supporting improvement through targeted TA and professional development.

Dispute resolution is also part of the general supervision system. The SEA operates IDEA dispute resolution activities through the ADE/ESS Dispute Resolution (DR) unit, which has 5 designated investigators who respond to citizens who alert the SEA to alleged noncompliance by PEAs. Complainants may submit a complaint, in either English or Spanish, online, through fax, or via US mail. Additional language translation is available upon request. The investigators review all complaints and then draft reports that specify determinations about compliance. ADE/ESS DR also has a designated compliance coordinator who ensures that corrective actions are completed. ADE/ESS DR regularly interfaces with the ADE/ESS Program Support and Monitoring (PSM) unit to analyze trends and to ensure consistency in supervision and technical assistance. ADE/ESS DR maintains a database that enables the collaboration between the various units that perform general supervision functions. It also allows management of the due process complaint system and provides access to mediation in line with IDEA and its implementing regulation requirements.

Finally, grant allocations, funding administration, and fiscal compliance are facilitated by the ADE/ESS Operations unit. This unit coordinates fiscal tracking, grant awards, and distribution of federal funds. These activities are augmented by the SEA's Grants Management Section, which provides single audit functions, distributes cash payments, applies federal funding holds, and compiles fiscal reports when PEAs finish a project period. The SEA Grants Management section and ADE/ESS Operations unit teams work collaboratively to leverage compliant practices in order for PEAs to become compliant with the IDEA.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.

The ADE/ESS technical assistance system involves providing information and guidance on promising practices in educating students with disabilities and furnishing information and guidance on the IDEA and Arizona's regulations and policies. This assistance is provided by all IDEA-funded ADE areas and takes place during onsite visits, regional meetings, conferences, and other events. Electronic and virtual professional development and technical assistance are provided via email, through the consultant of the day (COD) telephone line, and via virtual software and meeting platforms. Technical assistance materials are found throughout the ADE/ESS website, https://www.azed.gov/specialeducation, including the Arizona Technical Assistance System (AZ-TAS) documents web page, https://www.azed.gov/specialeducation/az-tas-documents, and on the ADE/ESS Promising Practices website,

https://www.azpromisingpractices.com/. During the 2021–2022 school year, ADE/ESS found it necessary to provide additional technical assistance related to the ongoing COVID-19 pandemic through an additional "Special Education Guidance for COVID-19" web page as well as through monthly virtual meetings for special education administrators located throughout Arizona.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

Please see the Professional Development System link for an explanation of Arizona's Technical Assistance and Professional Development System. https://www.azed.gov/specialeducation/professional-learning/

Broad Stakeholder Input:

The mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State's Systemic Improvement Plan (SSIP).

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

Apply stakeholder involvement from introduction to all Part B results indicators (y/n)

YES

Number of Parent Members:

67

Parent Members Engagement:

Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

Parent members of the State Education Advisory Panel (SEAP) participated in five sessions during SEAP meetings to receive updated information on the SPP/APR indicators. SEAP meetings were offered either in person or virtually in order to accommodate schedules. During these sessions, parents received information on each indicator's historical and current data, progress against targets, as well as updates on improvement strategies. Time was set aside at each meeting to answer questions and to solicit feedback from all SEAP members, including parents.

Three virtual presentations were held with parent members from Raising Special Kids (RSK), the state's Parent Training and Information Center. In an effort to gain broad representation, the sessions were advertised on RSK's website and social media platforms. The meetings were scheduled in the evenings, using a virtual platform to attract parents who have busy day schedules or limited time. For those who registered, RSK staff sent a text reminder the day before and on the day of the meeting. To increase representation, a Spanish-language interpreter was available at each forum.

During these sessions, parents were informed that stakeholder feedback is an ongoing process and that, while we were not soliciting feedback on target setting like we did last year, the objective of the meetings was to give updates on the State's performance against the current targets as well as to solicit feedback. To meet this objective, the presenter gave a simplified definition of each indicator along with how it could relate to the day-to-day life of a parent of a child with a disability. To deepen their understanding, the presenter described how the SPP/APR could be seen as analogous to their child's IEP. For example, both documents include measurable goals, and progress is reported on those goals at specific times during the year. To assist parents in analyzing year-over-year trends, they were shown graphs depicting historical as well as current data and encouraged to ask questions regarding their observations. Updates on any improvement strategies related to specific indicators were given as well as information on how parents can access up-to-date progress on the SPP/APR via the ADE/ESS website. Finally, parents were shown where to locate the public comment page if they would like to provide additional feedback.

Activities to Improve Outcomes for Children with Disabilities:

The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.

The State conducted activities at stakeholder meetings to increase the capacity of diverse groups of parents. Activities included listening to a presentation, participating during the presentation, and providing feedback after the presentation. The State sought out a diverse group of parents by partnering with Arizona's Parent Training and Information (PTI) Center, Raising Special Kids (RSK). RSK posted information in both English and Spanish on various social media platforms and used its website as a source for parents to learn about upcoming training opportunities. At the meetings, the State described the historical and current initiatives related to each indicator. To build parent support of these initiatives, time was set aside at each meeting to ensure that parents understood the specific activities the State was taking to improve the outcomes of children with disabilities. For each indicator, the lead facilitator gave an introduction, then ADE/ESS panel members led conversations regarding past and current initiatives. Collaboration and participation were encouraged in order to provide a safe platform for the parents' voices to be heard. Parents were informed that the State continues to seek feedback since stakeholder engagement is an ongoing process. Parents were shown where to locate the public comment page on the ADE/ESS if they wanted to provide relevant feedback.

Soliciting Public Input:

The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.

Target Setting:
Though new targets were not being set this year, stakeholders were engaged in the ongoing effort of measuring progress against the current targets in the SPP/APR.

Analyzing Data:

Data was visually depicted in graphs displaying historical and current trends that guided the presenter and audience to discuss possible reasons the data moved closer or farther from its intended target. Stakeholders were encouraged to ask questions and provide ideas for further analysis.

Developing Improvement Strategies:
Stakeholders were given an update on current improvement strategies related to specific indicators and provided ideas and examples of activities that could support the improvement of outcomes.

Evaluating Progress:
ADE/ESS is in the process of building a more robust SPP/APR section on its website in an effort to create a user-friendly interface for the indicators. One of the latest additions is a document that lists indicators 1 through 16 in a table of contents. Selecting one of these indicators connects the user to a two-page summary which includes its definition, data source, measurement, graph, and data table. The graph displays 10 years of data and targets, which can help stakeholders to understand historical trends as well as future goals. The accompanying data table below each graph lists the population sizes to give stakeholders a better understanding of the actual numbers behind the calculated percentages. The ADE/ESS website also houses videos of recorded special education advisory meetings that contain information about how progress is evaluated. Materials used in these meetings, including PowerPoint slides and handouts, are posted next to the videos. To solicit input on an ongoing basis, an opportunity for public comment is available at https://specialeducationpubliccommentform.azed.gov/PublicComment/.

The following meetings were conducted between March 2022 and January 2023 to provide ongoing communication with stakeholders regarding the SPP/APR.

• March 28, 2022: The State presented Indicators 4, 9, and 10 to SEAP
• June 14, 2022: The State presented Indicators 1 and 2 to SEAP
• September 27, 2022: The State presented Indicators 11 and 13 to SEAP
• November 15, 2022: The State presented Indicators 5, 6, 8, and 13 to SEAP
• December 1, 2022: The State presented Indicators 1, 2, and 14 to RSK
• December 15, 2022: The State presented Indicators 4, 9, 10, 5, 6, 11, 12, and 13 to Special Education Professionals Forum
• January 9, 2023: The State presented Indicators 1, 2, 3, 7, and 14 to RSK
• January 18, 2023: The State presented Indicators 15, 16, and 17 to RSK
• January 19, 2023: The State presented Indicators 1, 2, 3, 7, 14, 15, 16, and 17 to Special Education Professionals Forum
• January 24, 2023: The State presented Indicators 3, 7, and 17 to SEAP

Making Results Available to the Public:

The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.

A detailed breakdown of each indicator's progress against the targets set in the SPP/APR is available on the ADE/ESS website, https://www.azed.gov/specialeducation/sppapr/, under the list titled Arizona's Progress on the SPP/APR Indicators. This document is updated twice a year to include the most recent data.

A document describing the process of how stakeholder feedback was used to determine the FFY 2020–FFY 2025 targets and a document of public comments regarding targets and improvement strategies are available on the ADE/ESS website, https://www.azed.gov/specialeducation/sppapr/, under the list titled Public Reporting of SPP/APR Targets and Comments.

Reporting to the Public

How and where the State reported to the public on the FFY 2020 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2020 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

The following URL is the Arizona SPP/APR web page: https://www.azed.gov/specialeducation/sppapr/

The annual performance report (APR) on the State's progress and/or slippage for FFY 2020 is available on the website listed above. It is located in a list under the section titled State Performance Plan (SPP) and Annual Performance Report (APR) and is titled SPP/APR FFY 2020.

The ADE reports annually on the performance of each PEA located in the State on the targets in the SPP/APR no later than 120 days following the State's APR submission on the OSEP required submission date, generally on February 1, at the website listed above. It is located under the list titled State and PEA Performance by Indicator.

The SPP/APR is disseminated to the public by means of the ADE/ESS website. The ESS special education email listserv, ESS and Early Childhood Special Education (ECSE) specialists, trainings, and conferences serve as the vehicles to notify parents, the PEAs, and the public of the availability of the SPP/APR.

Special Education Monitoring Alerts, https://www.azed.gov/specialeducation/monitoring-alerts/, memoranda pertaining to specific topics, including the SPP/APR, are sent to the ADE/ESS special education email listserv and filed electronically online.

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2020 SPP/APR

Sources and Actions of Technical Assistance (TA) are listed below.

Collaboration for Effective Educator Development, Accountability, and Reform (CEEDAR) Center
• Connected faculty from educator preparation programs on the State Steering Committee with SEA presenters on policy topics as well as shared high-leverage practices with special education teachers and special education directors at local and national conferences.
• Attended the CEEDAR Cross State Convening and collaborated with our AZ CEEDAR team in monthly meetings to implement blueprint goals.

Center for IDEA Fiscal Reporting (CIFR)
• Attended CIFR annual conference and gained information about current fiscal policy and procedures that was used to refine local practices.
• A variety of resource documentation and training webinars were utilized by ADE/ESS teams.

Center on Positive Behavioral Interventions and Supports (PBIS)
• Content and resources were shared in ESS PBIS trainings for Tier 1, Tier 2, and Tier 3, on a PBIS resource webpage, and during a sustainability webinar series.

Complex Support Needs (CSN) Workgroup
• Attended an eight-week online course to provide learning opportunities for Indicator 13 stakeholders and special education teachers/staff.

Early Childhood Personnel Center (ECPC) Intensive Technical Assistance on Leadership
• Received intensive TA to support the continued development of Arizona's common statewide system ensuring that personnel are adequately trained and that there is a pipeline of new practitioners available.

Early Childhood Technical Assistance Center (ECTA) and DaSy (Data Systems)
• Utilized the Child Outcomes Summary (COS) Process technical assistance video resources as well as the webinar package for Arizona's learning management system (LMS).
• Invited a TA Specialist to support Professional Development statewide through a series of webinars on braiding funding to increase inclusion.
• Used ECTA's self-assessment with the state Inclusion Task Force to identify additional actions that may need to be taken in order to improve the percentage of preschool age children with disabilities included in regular early childhood programs.

IDEA Data Center (IDC)
• Attended the SSIP Data Quality Peer Group to discuss the components of the SSIP report.
• Attended the IDC Interactive Institute and the IDC SPP/APR Summit to collaborate with peers about the SPP/APR indicators.
• IDC staff provided valuable and specific feedback to assist with the narrative portions of the SPP/APR.
• Accessed webinars and recordings from the IDC website relating to various indicators and 618 data collections.

National Association for Family, School, and Community Engagement (NAFSCE)
• Participated in webinars and benefitted from online resources. The information was used for individualized consultation with special education directors. Strategies were also incorporated in survey instructions and supporting documentation.

National Training and Technical Assistance Center for Children, and Family Mental Health (NTTAC)
• Attended webinars with content specific to family support.

National Center for Educational Outcomes (NCEO) Community of Practice
• Addressed the 1% Threshold, including models for determining disproportionality as well as when and how to submit waivers for exceeding 1% participation.
• Gathered information on instructional considerations to meet the needs of all learners and strategies for involving parents.

Office of Special Education (OSEP) Monthly TA Call
• OSEP provided an overview of changes and general reminders that were used in drafting the SPP/APR narrative.
• Variety of resource documentation and training webinars attended by the ADE/ESS teams.

National Center for Systemic Improvement (NCSI)
• Attended the "American Rescue Plan (ARP) Supplemental IDEA Funds: State Panel and Open Door" webinar and asked questions on ARP Supplemental IDEA funds use and fiscal operations.
• The State Director met monthly with NCSI State Director Mentor to discuss local policy needs, communication, and resource strategies and to connect with other SEAs with similar needs or challenges. Discussed and received feedback on corrective action related to OSEP findings or feedback.
• Applied new understanding from a book study regarding building coherence to a professional learning strategic planning process. Data literacy resources were shared within the PLS internal team and used them to plan for data discussions.
• Utilized feedback from NCSI specific to strengthening the stakeholder engagement section.in the SSIP.
• Attended collaborative group NCSI sessions that focused on such things as implementing evidence-based practices, using data to drive systems, and how different units can work together.
• Shared resources related to Universal Design for Learning and evidence-based practices with ESS professional learning providers. These resources provided tools and information to foster cross-agency collaboration to support agency cohesion and to enhance connections between the SSIP and State Personal Development Grant (SPDG) Program.
• Reviewed reporting requirements as well as programmatic monitoring requirements to ensure alignment of OSEP requirements.
• Variety of resource documentation and training webinars attended by ADE/ESS teams.
• Discussed and applied resources shared amongst SEA Directors related to General Supervision, DMS 2.0 and federal/state monitoring activities, the placement of students in nontraditional educational environments, and enhancements to policies, practices, and procedures.
• Discussed SEA organizational design improvement at national Cross-State Learning Collaboratives (CSLC) convening.

National Technical Assistance Center on Transition (NTACT-C)
• Used information presented through NTACT-C to update, develop, and deliver professional learning specific to secondary transition as well as to develop resources and best practice models for secondary transition and post school outcomes data collection.
• Increased student access to preemployment transition services (Pre-ETS) in collaboration with Arizona Rehabilitation Services and Vocational Rehabilitation (AZRSAVR).
• Collaborative meetings with other SEA teams regarding the collection, disaggregation, analysis, and dissemination efforts for local, statewide, and national post school outcomes data. Staff attended and obtained tangible resources during bimonthly meetings.

• Attended a mid-year check-in to discuss and apply resources towards effective youth engagement, collaborative processes, and enhanced content for professional learning.
• Supplemental meetings to support best practice delivery. The team made adjustments to the facilitation of PSO focus group, technical assistance surrounding respondent eligibility for the PSO survey, and resources to enhance technical assistance for IEP teams.

State Personnel Development Network (SIGnetwork)
• Enhanced systems for professional learning, coaching, and sustainability for our State Personnel Development Grant (SPDG) project.

State-to-State Sharing Collaborative: Arizona, Colorado, Idaho, Missouri, Texas, and Utah
• Utilized project recommendations, analysis, and strategies for supporting secondary transition best practice implementation in Arizona.

Technical Assistance for Excellence in Special Education (TAESE)
• Met monthly with TAESE staff and other SEA Directors to discuss special education policy and federal updates, as well as participate in SEA-level information-sharing and collaboration regarding special education issues. Discussed educational placement of students in nontraditional settings at TAESE Summit to help inform local policies.

Time, Instructional Effectiveness, Engagement, and State and District Support (TIES) Center
• Provided resources designed to be incorporated into PEA professional development to support teachers of students with disabilities.

Intro - OSEP Response

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022 determination letter informed the State that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

Intro - Required Actions

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target. Provide the actual numbers used in the calculation.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	77.38%

FFY	2016	2017	2018	2019	2020
Target >=	80.00%	80.00%	80.00%	75.60%	77.38%
Data	68.98%	66.40%	67.65%	68.98%	81.84%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	77.88%	78.38%	78.88%	79.38%	79.88%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

In addition, at the annual Arizona IDEA Conference, an analysis of trend data was presented for indicators 1, 2, 6, 7, and 14. At these sessions, attendees had an opportunity to ask questions as well as to complete a survey to provide feedback.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,451

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	31
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,427

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
6,451	8,909	81.84%	77.88%	72.41%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

During school year 2020-2021, the increase of students with disabilities exiting special education increased due to challenges public education agencies (PEAs) experienced in determining whether students continued in education during COVID-19. When students with disabilities exit special education and the PEA cannot obtain a status update on the student continuing in any form of education, the student is automatically classified as a dropout. This shift caused the total number of students exiting to increase, which also decreased the graduation rate. Additionally, during COVID-19, Arizona did see a slight increase in the count of students with disabilities who graduated; however, the increase in dropout significantly outpaced those students due to COVID-19 and its effect on PEAs in the State. Looking ahead to more current data, Arizona now observes similar exit results to before COVID-19, and the agency expects these values to move back to a normal range. The SEA also looked at data for graduation and dropout for all students in Arizona to identify potential causes for the change. The agency noticed that Arizona did see a change in the rate of students who re-enrolled after dropping out the previous year from FFY 2019 to FFY 2021.

Graduation Conditions

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma.

Conditions to Graduate with a Regular Diploma
The Arizona State Board of Education establishes the minimum course of study and competency requirements for graduation from high school through the rulemaking process. The minimum course of study and competency requirements are outlined in Title 7, Chapter 2 of the Arizona Administrative Code. The minimum course of study is mandated in State Board Rule R7-2-302.

While the Arizona State Board of Education is charged with prescribing a minimum course of study and corresponding competency requirements, incorporating the academic standards in at least the areas of reading, writing, mathematics, science, and social studies, a PEA's governing board has the flexibility to prescribe a course of study and competency requirements that are consistent with and not less than the course of study and competency requirements that the Arizona State Board of Education prescribes.

The Arizona State Board of Education has established 22 required credits as the minimum number of credits in specified subject areas necessary for high school graduation. For the graduating class of 2017 going forward, students must earn credits in the content areas listed below, as determined by the PEA:
• English or English as a Second Language: 4 credits
• Social Studies: 3 credits
• Mathematics: 4 credits
• Science: 3 credits
• The Arts or Career and Technical Education: 1 credit
• Locally prescribed courses: 7 credits
In addition to the required credits for graduation, Arizona has a testing requirement. A civics test has been required since the graduating class of 2017. High school graduates are required to pass (60/100) a civics test identical to the civics portion of the naturalization test used by the U.S. Citizenship and Immigration Services. A student with a disability is not required to pass the civics test to graduate from high school unless he or she is learning at a level appropriate for the pupil's grade level in a specific academic area and unless a passing score on the statewide assessment or the civics test is specifically required in a specific academic area by the pupil's individualized education program (IEP), as mutually agreed on by the pupil's parents and the pupil's IEP team or the pupil, if the pupil is at least eighteen years of age.
• Passing AZM2 statewide assessments are not a state requirement for graduation; however, local schools may choose to develop their academic requirements related to the AZM2 assessment.
• The local governing board of each district or charter school is responsible for developing a course of study and graduation requirements for all students placed in special education programs (Arizona Administrative Code R7-2-302 (6)). Students placed in special education, grades 9 through 12, are eligible to receive a high school diploma upon completion of the graduation requirements.
• Algebra II requirement may be modified using a Personal Curriculum, as outlined in R7-2-302.03

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a

state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	22.39%

FFY	2016	2017	2018	2019	2020
Target <=	27.80%	27.70%	26.80%	25.90%	22.39%
Data	26.85%	23.46%	21.93%	22.33%	18.03%

Targets

FFY	2021	2022	2023	2024	2025
Target <=	21.89%	21.39%	20.89%	20.39%	19.89%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

In addition, at the annual Arizona IDEA Conference, an analysis of trend data was presented for indicators 1, 2, 6, 7, and 14. At these sessions, attendees had an opportunity to ask questions as well as to complete a survey to provide feedback.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,451

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	31
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,427

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,427	8,909	18.03%	21.89%	27.24%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

During school year 2020-2021, the increase of students with disabilities exiting special education increased due to challenges public education agencies (PEAs) experienced in determining whether students continued in education during COVID-19. When students with disabilities exit special education and the PEA cannot obtain a status update on the student continuing in any form of education, the student is automatically classified as a dropout. This shift caused the total number of students exiting to increase, which also decreased the graduation rate. Additionally, during COVID-19, Arizona did see a slight increase in the count of students with disabilities who graduated; however, the increase in dropout significantly outpaced those students due to COVID-19 and its effect on PEAs in the State. Looking ahead to more current data, Arizona now observes similar exit results to before COVID-19, and the agency expects these values to move back to a normal range. The SEA also looked at data for graduation and dropout for all students in Arizona to identify potential causes for the change. The agency noticed that Arizona did see a change in the rate of students who re-enrolled after dropping out the previous year from FFY 2019 to FFY 2021.

Provide a narrative that describes what counts as dropping out for all youth

Arizona uses the same data as used for reporting to the Department of Education under section 618 of the Individuals with Disabilities Education Act (IDEA) to describe what counts as dropping out for all youths. A dropout between the ages of 14 and 21 is defined as an individual who meets all of the following:
1) was publicly enrolled in special education at the start of the reporting period but was not in special education at the end of the reporting year;
2) was not indicated as transferring to regular education;
3) was not indicated as moving out of a public education organization's purview and continuing in another non-public educational program; and
4) did not meet any of the following exclusionary conditions:
-Presumed to be continuing in special education as reported by the public education agency at the end of the year
-Graduated with a high school diploma
-Reached the maximum age for special education
-Died

Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)

NO

If yes, explain the difference in what counts as dropping out for youth with IEPs.

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

      A. Participation rate for children with IEPs.

      B. Proficiency rate for children with IEPs against grade level academic achievement standards.

      C. Proficiency rate for children with IEPs against alternate academic achievement standards.

      D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

Measurement

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	89.54%
Reading	B	Grade 8	2020	84.24%
Reading	C	Grade HS	2020	67.59%
Math	A	Grade 4	2020	89.68%
Math	B	Grade 8	2020	84.55%
Math	C	Grade HS	2020	68.33%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/05/2023

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	12,158	11,268	9,180
b. Children with IEPs in regular assessment with no accommodations	10,930	9,757	7,134
c. Children with IEPs in regular assessment with accommodations	179	118	0
d. Children with IEPs in alternate assessment against alternate standards	753	846	736

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/05/2023

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	12,352	11,432	9,163
b. Children with IEPs in regular assessment with no accommodations	11,111	9,932	7,117
c. Children with IEPs in regular assessment with accommodations	192	107	0
d. Children with IEPs in alternate assessment against alternate standards	751	847	732

*The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	11,862	12,158	89.54%	95.00%	97.57%	Met target	No Slippage
B	Grade 8	10,721	11,268	84.24%	95.00%	95.15%	Met target	No Slippage
C	Grade HS	7,870	9,180	67.59%	95.00%	85.73%	Did not meet target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	12,054	12,352	89.68%	95.00%	97.59%	Met target	No Slippage
B	Grade 8	10,886	11,432	84.55%	95.00%	95.22%	Met target	No Slippage
C	Grade HS	7,849	9,163	68.33%	95.00%	85.66%	Did not meet target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is https://www.azed.gov/accountability-research/data/. Upon review, the file represents the special education sub-group equally to all other groups, except for accommodations. The SEA will remedy this omission.

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

The SEA updated the Web link provided to ensure that it reports to the public, for FFY 2020, statewide assessments of children with disabilities in accordance with 34 C.F.R. 300.160(f).

3A - OSEP Response

For FFY 2021, the State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

      A. Participation rate for children with IEPs.

      B. Proficiency rate for children with IEPs against grade level academic achievement standards.

      C. Proficiency rate for children with IEPs against alternate academic achievement standards.

      D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	16.35%
Reading	B	Grade 8	2020	6.00%
Reading	C	Grade HS	2020	4.74%
Math	A	Grade 4	2020	13.62%
Math	B	Grade 8	2020	4.53%
Math	C	Grade HS	2020	3.48%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	16.85%	17.35%	17.85%	18.35%	18.85%
Reading	B >=	Grade 8	6.30%	6.60%	6.90%	7.20%	7.50%
Reading	C >=	Grade HS	4.94%	5.14%	5.34%	5.54%	5.74%
Math	A >=	Grade 4	14.16%	14.70%	15.24%	15.78%	16.32%
Math	B >=	Grade 8	4.86%	5.19%	5.52%	5.85%	6.18%
Math	C >=	Grade HS	3.70%	3.92%	4.14%	4.36%	4.58%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three

one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	11,109	9,875	7,119
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,701	618	676
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	15	13	0

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	11,303	10,039	7,117
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,696	521	588
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	22	6	0

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	1,716	11,109	16.35%	16.85%	15.45%	Did not meet target	No Slippage
B	Grade 8	631	9,875	6.00%	6.30%	6.39%	Met target	No Slippage
C	Grade HS	676	7,119	4.74%	4.94%	9.50%	Met target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	1,718	11,303	13.62%	14.16%	15.20%	Met target	No Slippage
B	Grade 8	527	10,039	4.53%	4.86%	5.25%	Met target	No Slippage
C	Grade HS	588	7,117	3.48%	3.70%	8.26%	Met target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is https://www.azed.gov/accountability-research/data/. The special education sub-group is presented equally with all other groups.

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

The SEA updated the Web link provided to ensure that it reports to the public, for FFY 2020, statewide assessments of children with disabilities in accordance with 34 C.F.R. 300.160(f).

3B - OSEP Response

For FFY 2021, the State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on regular assessments who were provided accommodations (that did not result in an invalid score) at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3B - Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

> A. Participation rate for children with IEPs.
>
> B. Proficiency rate for children with IEPs against grade level academic achievement standards.
>
> C. Proficiency rate for children with IEPs against alternate academic achievement standards.
>
> D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	34.81%
Reading	B	Grade 8	2020	38.37%
Reading	C	Grade HS	2020	45.41%
Math	A	Grade 4	2020	48.20%
Math	B	Grade 8	2020	46.91%
Math	C	Grade HS	2020	49.08%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	35.52%	36.23%	36.94%	37.65%	38.36%
Reading	B >=	Grade 8	39.17%	39.97%	40.77%	41.57%	42.37%
Reading	C >=	Grade HS	46.01%	46.61%	47.21%	47.81%	48.41%
Math	A >=	Grade 4	48.70%	49.20%	49.70%	50.20%	50.70%
Math	B >=	Grade 8	47.61%	48.31%	49.01%	49.71%	50.41%
Math	C >=	Grade HS	49.58%	50.08%	50.58%	51.08%	51.58%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	753	846	736
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	246	303	349

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	751	847	732
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	364	380	334

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	246	753	34.81%	35.52%	32.67%	Did not meet target	Slippage
B	Grade 8	303	846	38.37%	39.17%	35.82%	Did not meet target	Slippage
C	Grade HS	349	736	45.41%	46.01%	47.42%	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

ADE believes the slippage may be caused because it is the first time these students have participated in an alternate assessment. A COVID Impact Study on alternate assessments analyzed students that participated in Alternate Assessment. In the review, there were impacts on the population of students who tested before COVID-19 vs. those who tested in 2021, which also impacted learning and development, affecting performance.

Provide reasons for slippage for Group B, if applicable

A plausible reason for slippage is that older students may not have attended in-person targeted instruction opportunities offered during the COVID-19 pandemic (when most PEAs in Arizona provided virtual instruction) compared to younger students.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	364	751	48.20%	48.70%	48.47%	Did not meet target	No Slippage
B	Grade 8	380	847	46.91%	47.61%	44.86%	Did not meet target	Slippage
C	Grade HS	334	732	49.08%	49.58%	45.63%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Provide reasons for slippage for Group B, if applicable

There are two potential reasons for slippage. First, older students may not have attended in-person targeted instruction opportunities offered during the COVID-19 pandemic (when most PEAs in Arizona provided virtual instruction) compared to younger students. Also, the slippage in math aligns with what the SEA observed in math assessment results at the state and national levels. The SEA has noted that learning loss was greater in the math areas compared to reading.

Provide reasons for slippage for Group C, if applicable

There are two potential reasons for slippage. First, older students may not have attended in-person targeted instruction opportunities offered during the COVID-19 pandemic (when most PEAs in Arizona provided virtual instruction) compared to younger students. Also, the slippage in math aligns with what the SEA observed in math assessment results at the state and national levels. The SEA has noted that learning loss was greater in the math areas compared to reading.

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is https://www.azed.gov/accountability-research/data/. Upon review, alternate assessment performance for students with disabilities is reported equally with all other test types.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

The SEA updated the Web link provided to ensure that it reports to the public, for FFY 2020, statewide assessments of children with disabilities in accordance with 34 C.F.R. 300.160(f).

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

> A. Participation rate for children with IEPs.
>
> B. Proficiency rate for children with IEPs against grade level academic achievement standards.
>
> C. Proficiency rate for children with IEPs against alternate academic achievement standards.
>
> D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	29.36
Reading	B	Grade 8	2020	29.07
Reading	C	Grade HS	2020	28.13
Math	A	Grade 4	2020	21.50
Math	B	Grade 8	2020	22.39
Math	C	Grade HS	2020	23.50

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	28.86	28.36	27.86	27.36	26.86
Reading	B <=	Grade 8	28.57	28.07	27.57	27.07	26.57
Reading	C <=	Grade HS	27.88	27.63	27.38	27.13	26.88
Math	A <=	Grade 4	21.00	20.50	20.00	19.50	19.00
Math	B <=	Grade 8	21.89	21.39	20.89	20.39	19.89
Math	C <=	Grade HS	23.25	23.00	22.75	22.50	22.25

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	78,793	86,496	76,142
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	11,109	9,875	7,119
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	34,812	30,893	32,211
d. All students in regular assessment with accommodations scored at or above proficient against grade level	23	20	0
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,701	618	676
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	15	13	0

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	79,355	87,330	77,635
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	11,303	10,039	7,117
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	30,990	23,480	34,333
d. All students in regular assessment with accommodations scored at or above proficient against grade level	29	38	0
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,696	521	588
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	22	6	0

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	15.45%	44.21%	29.36	28.86	28.76	Met target	No Slippage
B	Grade 8	6.39%	35.74%	29.07	28.57	29.35	Did not meet target	No Slippage
C	Grade HS	9.50%	42.30%	28.13	27.88	32.81	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

A possible reason for the slippage is that, for the reading assessment, Arizona saw similar results to the National Assessment of Educational Progress (NAEP) in that students held steady but did not make true gains.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	15.20%	39.09%	21.50	21.00	23.89	Did not meet target	Slippage
B	Grade 8	5.25%	26.93%	22.39	21.89	21.68	Met target	No Slippage
C	Grade HS	8.26%	44.22%	23.50	23.25	35.96	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

A possible reason for the slippage is that for the math assessment, Arizona saw similar results to the National Assessment of Educational Progress (NAEP) in that students held steady but did not make true gains.

Provide reasons for slippage for Group C, if applicable

A possible reason for the slippage is that for the math assessment, Arizona saw similar results to the National Assessment of Educational Progress (NAEP) in that students held steady but did not make true gains.

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	40.00%

FFY	2016	2017	2018	2019	2020
Target <=	0.00%	0.00%	0.00%	0.00%	40.00%
Data	0.46%	0.00%	19.44%	31.03%	NVR

Targets

FFY	2021	2022	2023	2024	2025
Target <=	35.00%	30.00%	25.00%	20.00%	15.00%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
3	5	NVR	35.00%	60.00%	Did not meet target	N/A

Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring (34 CFR §300.170(a))

Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State

State's definition of "significant discrepancy" and methodology

Arizona utilizes a rate ratio methodology similar to significant disproportionality but only for children with disabilities who had suspensions and expulsions exceeding 10 days in a school year.

Rate ratio = PEA-level suspension/expulsion rate for children with disabilities ÷ state-level suspension/expulsion rate for children with disabilities.
The cell (numerator) is unique children with disabilities in a PEA that were suspended or expelled greater than 10 days in a school year
The N (denominator) is unique children with a disability in the state that were suspended or expelled greater than 10 days in a school year
The minimum cell and/or n-size: Minimum n (risk denominator) size = 30 and Minimum cell (risk numerator) size = 10

The level at which significant discrepancy is identified: 3.0 (or 3 times as likely) the PEA-level suspension/expulsion rate for children with disabilities is above the state-level rate of state-level suspension/expulsion rate for children with disabilities. Arizona aligns this level with a process similar to significantly disproportionality and resources provided by the IDEA Data Center.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The State reviewed the PEAs' data from the significant discrepancy calculation and identified 3 PEAs as having a significant discrepancy. The SEA continuously monitors PEAs on the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Arizona required the identified PEAs to maintain special education policies and procedures in compliance with all regulatory requirements before Part B IDEA Entitlement funds could be approved by ADE/ESS. ADE/ESS specialists conduct on-site visits and/or desk audits to validate the policies and procedures made by the PEAs during a programmatic monitoring. Upon completion of the reviews, Arizona determined whether the PEAs complied with IDEA requirements that pertain to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

None of the identified PEAs had policies, procedures, or practices that contributed to significant discrepancy.
The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

The State must provide valid and reliable data for FFY 2021 in the FFY 2021 SPP/APR.

Response to actions required in FFY 2020 SPP/APR

In the FFY 2020 SPP/APR, Arizona reported that the significant decrease in discipline referrals in Indicators 4A and 4B was likely due to two different criteria:
1. During COVID-19, Arizona moved heavily to virtual instruction while drafting and adopting a legislative bill that allowed instructional time to be made up at any time throughout the school year (A.R.S. §15-901.08).
2. This instructional bill, combined with alternative education programs acting as an intermediary, allowed for students to receive instruction in a variety of settings in lieu of a suspension or expulsion (A.R.S. §15-841).

The SEA believed the decrease was due largely to the shift to virtual instruction and also responded to the initial feedback from OSEP regarding FFY 2020 Indicator 4A and 4B data by taking the following actions to revise its data collection and reporting to ensure that its data is valid and reliable, which is consistent with the IDEA Section 618 data collection requirements and the Part B Indicator Measurement Table.

In December 2022, the SEA issued a memo announcing a change in discipline data collection from a separate special education software application (ESS Discipline Data System) to the statewide student information system, AzEDS, beginning in school year (SY) 2024. The SEA also announced that beginning in SY 2024, any instance in which a PEA removes a child from his or her educational environment for disciplinary purposes must be reported into AzEDS, including the violation and action taken by the PEA.
https://www.azed.gov/sites/default/files/2022/12/Discipline%20Data%20Submissions%20Memorandum.pdf

Finally, the SEA will require PEAs to submit discipline data for students who are reassigned to an alternative education program as an alternative to a suspension or expulsion or who are placed into an alternative to a suspension program (ARS 15-841). This way, the agency can clearly report all scenarios of removal from educational environments for federal reporting. Data collection related to these entities for SY 2022 and 2023 will be conducted through an interim survey method. Data collection for SY 2024 and beyond will be conducted as outlined in the following memo: https://www.azed.gov/sites/default/files/2022/12/221229%20-%20Discipline%20Data%20for%20Students%20with%20Disabilities.pdf.

The SEA will provide professional development in March 2023 and ongoing technical assistance to support these data collection and reporting changes for school years 2022, 2023, and 2024.

4A - OSEP Response

The State did not report valid and reliable data. These data are not valid and reliable because the State has not completed actions required in the FFY 2020 SPP/APR. Specifically, the State reported that it is taking actions to "revise its data collection and reporting to ensure its data is valid and reliable, which is consistent with the IDEA Section 618 data collection requirements and the Part B Indicator Measurement Table."

The State has revised the baseline for this indicator, using data from FFY 2020, but OSEP cannot accept that revision because the data are not valid and reliable. OSEP cannot accept the State's FFYs 2021-2025 targets for this indicator because OSEP cannot determine whether the State's end targets for FFY 2025 reflect improvement over the State's baseline data, given that the State's revised baseline cannot be accepted, as noted above.

4A - Required Actions

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR.

The State must provide the required baseline and targets for FFY 2022 through FFY 2025 in the FFY 2022 SPP/APR.

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

> A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

> B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

> --The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

> --The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable
Select yes if this indicator is not applicable.
NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	NVR

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

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Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2	0	3	NVR	0%	0.00%	Met target	N/A

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

Arizona utilizes a rate ratio methodology similar to significant disproportionality but only for children with disabilities who had suspensions and expulsions exceeding 10 days in a school year by race/ethnicity.

Rate ratio = PEA-level suspension/expulsion rate for children with disabilities by a specific race/ethnicity ÷ PEA-level suspension/expulsion rate for children with disabilities by all other race/ethnicities. If the PEA does not meet the N-size, then the comparison group of the risk ratio will use the State-level suspension/expulsion rate for children with disabilities by all other race/ethnicities.

The cell (numerator) is unique children with disabilities by a specific race/ethnicity in a PEA that were suspended or expelled greater than 10 days in a school year
The N (denominator) is unique children with a disability by all other race/ethnicities in the PEA or State that were suspended or expelled greater than 10 days in a school year
The minimum cell and/or n-size: Minimum n (risk denominator) size = 30 and Minimum cell (risk numerator) size = 10

The level at which significant discrepancy is identified: 3.0 (or 3 times as likely) in the risk ratio. Arizona aligns this level with a process similar to significantly disproportionality and resources provided by the IDEA Data Center.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The State reviewed the PEAs' data from the significant discrepancy calculation and identified 2 PEAs as having a significant discrepancy. The SEA continuously monitors PEAs on the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Arizona required the identified PEAs to maintain special education policies and procedures in compliance with all regulatory requirements before Part B

IDEA Entitlement funds could be approved by ADE/ESS. ADE/ESS specialists conduct on-site visits and/or desk audits to validate the policies and procedures made by the PEAs during a programmatic monitoring. Upon completion of the reviews, Arizona determined whether the PEAs complied with IDEA requirements that pertain to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

None of the identified PEAs had policies, procedures, or practices that contributed to significant discrepancy.
The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

The State must provide valid and reliable data for FFY 2021 in the FFY 2021 SPP/APR.

Response to actions required in FFY 2020 SPP/APR

In the FFY 2020 SPP/APR, Arizona reported that the significant decrease in discipline referrals in Indicators 4A and 4B was likely due to two different criteria:
1. During COVID-19, Arizona moved heavily to virtual instruction while drafting and adopting a legislative bill that allowed instructional time to be made up at any time throughout the school year (A.R.S. §15-901.08).
2. This instructional bill, combined with alternative education programs acting as an intermediary, allowed for students to receive instruction in a variety of settings in lieu of a suspension or expulsion (A.R.S. §15-841).

The SEA believed the decrease was due largely to the shift to virtual instruction and also responded to the initial feedback from OSEP regarding FFY 2020 Indicator 4A and 4B data by taking the following actions to revise its data collection and reporting to ensure that its data is valid and reliable, which is consistent with the IDEA Section 618 data collection requirements and the Part B Indicator Measurement Table.

In December 2022, the SEA issued a memo announcing a change in discipline data collection from a separate special education software application (ESS Discipline Data System) to the statewide student information system, AzEDS, beginning in school year (SY) 2024. The SEA also announced that beginning in SY 2024, any instance in which a PEA removes a child from his or her educational environment for disciplinary purposes must be reported into AzEDS, including the violation and action taken by the PEA.
https://www.azed.gov/sites/default/files/2022/12/Discipline%20Data%20Submissions%20Memorandum.pdf

Finally, the SEA will require PEAs to submit discipline data for students who are reassigned to an alternative education program as an alternative to a suspension or expulsion or who are placed into an alternative to a suspension program (ARS 15-841). This way, the agency can clearly report all scenarios of removal from educational environments for federal reporting. Data collection related to these entities for SY 2022 and 2023 will be conducted through an interim survey method. Data collection for SY 2024 and beyond will be conducted as outlined in the following memo: https://www.azed.gov/sites/default/files/2022/12/221229%20-%20Discipline%20Data%20for%20Students%20with%20Disabilities.pdf.

The SEA will provide professional development in March 2023 and ongoing technical assistance to support these data collection and reporting changes for school years 2022, 2023, and 2024.

4B - OSEP Response

The State did not report valid and reliable data. These data are not valid and reliable because the State has not completed actions required in the FFY 2020 SPP/APR. Specifically, the State reported that it is taking actions to "revise its data collection and reporting to ensure its data is valid and reliable, which is consistent with the IDEA Section 618 data collection requirements and the Part B Indicator Measurement Table."
Therefore, OSEP could not determine whether the State met its target.

4B- Required Actions

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR.

Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

> A. Inside the regular class 80% or more of the day;
>
> B. Inside the regular class less than 40% of the day; and
>
> C. In separate schools, residential facilities, or homebound/hospital placements.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

Measurement

> A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
>
> B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
>
> C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA, explain.

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A	2019	Target >=	64.50%	65.00%	65.50%	67.00%	68.05%
A	68.03%	Data	65.76%	66.57%	66.93%	68.03%	68.05%
B	2019	Target <=	14.90%	14.70%	14.50%	13.90%	13.70%
B	13.69%	Data	14.74%	14.19%	14.00%	13.69%	13.70%
C	2019	Target <=	2.00%	2.00%	1.90%	1.90%	2.76%
C	2.52%	Data	1.99%	2.33%	2.48%	2.52%	2.76%

Targets

FFY	2021	2022	2023	2024	2025
Target A >=	68.84%	69.63%	70.42%	71.21%	72.00%
Target B <=	13.58%	13.46%	13.34%	13.22%	13.10%
Target C <=	2.70%	2.64%	2.58%	2.52%	2.46%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	137,719
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	94,657
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	18,764
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	3,244
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	109
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	344

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.
NO

FFY 2021 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	94,657	137,719	68.05%	68.84%	68.73%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	18,764	137,719	13.70%	13.58%	13.62%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements *[c1+c2+c3]*	3,697	137,719	2.76%	2.70%	2.68%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

> A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

> B. Separate special education class, separate school or residential facility.

> C. Receiving special education and related services in the home.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS089.

Measurement

> A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

> B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

> C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (*e.g.*, 75-85%). Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under IDEA section 618, explain.

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data – 6A, 6B

Part	FFY	2016	2017	2018	2019	2020
A	Target >=	51.00%	51.50%	52.00%	55.00%	27.23%
A	Data	51.36%	54.09%	54.75%	30.23%	27.23%
B	Target <=	44.40%	44.20%	44.00%	38.60%	63.36%
B	Data	42.22%	39.93%	38.80%	60.42%	63.36%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

In addition, at the annual Arizona IDEA Conference, an analysis of trend data was presented for indicators 1, 2, 6, 7, and 14. At these sessions, attendees had an opportunity to ask questions as well as to complete a survey to provide feedback.

Targets

Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.

Inclusive Targets

Please select if the State wants to use target ranges for 6C.

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

Part	Baseline Year	Baseline Data
A	2019	30.23%
B	2019	60.42%
C	2020	0.64%

Inclusive Targets – 6A, 6B

FFY	2021	2022	2023	2024	2025
Target A >=	28.53%	29.83%	31.13%	32.43%	33.73%
Target B <=	61.86%	60.36%	58.86%	57.36%	55.86%

Inclusive Targets – 6C

FFY	2021	2022	2023	2024	2025
Target C <=	0.62%	0.59%	0.57%	0.54%	0.52%

Prepopulated Data

Data Source:

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	2,956	4,685	474	8,115
a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	777	1,557	171	2,505
b1. Number of children attending separate special education class	1,910	2,619	250	4,779
b2. Number of children attending separate school	45	66	6	117
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	12	19	0	31

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

FFY 2021 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	2,505	8,115	27.23%	28.53%	30.87%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	4,896	8,115	63.36%	61.86%	60.33%	Met target	No Slippage
C. Home	31	8,115	0.64%	0.62%	0.38%	Met target	No Slippage

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

      A. Positive social-emotional skills (including social relationships);

      B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

      C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

State selected data source.

Measurement

Outcomes:

      A. Positive social-emotional skills (including social relationships);
      B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
      C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

      a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
      b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
      c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
      d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
      e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 1: Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

Summary Statement 2: The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 2: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining "comparable to same-aged peers." If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining "comparable to same-aged peers" has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A1	2017	Target >=	81.00%	81.50%	82.00%	82.50%	61.70%
A1	67.93%	Data	79.01%	67.93%	65.86%	63.19%	61.70%

A2	2017	Target >=	64.00%	64.50%	65.00%	65.50%	42.80%
A2	50.36%	Data	60.31%	50.36%	49.77%	42.96%	42.80%
B1	2017	Target >=	80.00%	80.50%	81.00%	81.50%	63.37%
B1	67.20%	Data	78.55%	67.20%	69.73%	61.28%	63.37%
B2	2017	Target >=	63.00%	63.50%	64.00%	64.50%	48.88%
B2	48.88%	Data	59.36%	48.88%	50.08%	40.47%	44.46%
C1	2017	Target >=	77.00%	77.50%	78.00%	78.50%	62.79%
C1	56.26%	Data	78.69%	56.26%	63.93%	62.77%	62.79%
C2	2017	Target >=	68.00%	68.50%	69.00%	69.50%	36.93%
C2	42.64%	Data	80.86%	42.64%	43.60%	36.93%	36.93%

Targets

FFY	2021	2022	2023	2024	2025
Target A1 >=	62.95%	64.20%	65.45%	66.70%	67.95%
Target A2 >=	44.50%	46.20%	47.90%	49.60%	51.30%
Target B1 >=	64.57%	65.77%	66.97%	68.17%	69.37%
Target B2 >=	49.78%	50.68%	51.58%	52.48%	53.38%
Target C1 >=	64.04%	65.29%	66.54%	67.79%	69.04%
Target C2 >=	38.33%	39.73%	41.13%	42.53%	43.93%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

In addition, at the annual Arizona IDEA Conference, an analysis of trend data was presented for indicators 1, 2, 6, 7, and 14. At these sessions, attendees could ask questions and complete a survey to provide feedback.

FFY 2021 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

4,163

Outcome A: Positive social-emotional skills (including social relationships)

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	56	1.35%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,234	29.64%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	744	17.87%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,175	28.22%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	954	22.92%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	1,919	3,209	61.70%	62.95%	59.80%	Did not meet target	Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,129	4,163	42.80%	44.50%	51.14%	Met target	No Slippage

Outcome B: Acquisition and use of knowledge and skills (including early language/communication)

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	9	0.22%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,358	32.62%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	969	23.28%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,103	26.50%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	724	17.39%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	2,072	3,439	63.37%	64.57%	60.25%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	1,827	4,163	44.46%	49.78%	43.89%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	83	1.99%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,259	30.24%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	616	14.80%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,250	30.03%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	955	22.94%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	1,866	3,208	62.79%	64.04%	58.17%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,205	4,163	36.93%	38.33%	52.97%	Met target	No Slippage

Part	Reasons for slippage, if applicable
A1	One possible explanation of slippage for the FFY 2021 cohort is that exiting children experienced a large portion of their potential 36-month preschool career at home due to school closures and with special education services being delivered virtually. Because of the closures, many children did not have the same opportunities for learning alongside peers that prior cohorts had. In addition, PEAs reported staffing challenges (illness, long-term substitutes) with frequent changes in caregivers, which is likely due to the impact of COVID-19. Another possible reason is that children determined eligible during the school closures of 2020–2021 were assessed upon entry through parent reports and virtual assessments and, upon return to in-person programming, were given a more accurate assessment. These differences between entry and exit assessment practices may have affected results. For example, this cohort had higher entry scores than previous years, resulting in a higher percentage of children in trajectory E, which is not included in Summary Score 1 (SS1). Similarly, a significant number of the exit scores of children who entered as a 6 or 7 were scored as functioning lower upon exit once back in an in-person learning arrangement, resulting in children being categorized as As and Bs, which are also not included in the SS1.
B1	One possible explanation of slippage for the FFY 2021 cohort is that exiting children experienced a large portion of their potential 36-month preschool career at home due to school closures and with special education services being delivered virtually. Because of the closures, many children did not have the same opportunities for learning alongside peers that prior cohorts had. In addition, PEAs reported staffing challenges (illness, long-term substitutes) with frequent changes in caregivers, which is likely due to the impact of COVID-19. Another possible reason is that children determined eligible during the school closures of 2020–2021 were assessed upon entry through parent reports and virtual assessments and, upon return to in-person programming, were given a more accurate assessment. These differences between entry and exit assessment practices may have affected results. For example, this cohort had higher entry scores than previous years, resulting in a higher percentage of children in trajectory E, which is not included in Summary Score 1 (SS1). Similarly, a significant number of the exit scores of children who entered as a 6 or 7 were scored as functioning lower upon exit once back in an in-person learning arrangement, resulting in children being categorized as As and Bs, which are also not included in the SS1.
C1	One possible explanation of slippage for the FFY 2021 cohort is that exiting children experienced a large portion of their potential 36-month preschool career at home due to school closures and with special education services being delivered virtually. Because of the closures, many children did not have the same opportunities for learning alongside peers that prior cohorts had. In addition, PEAs reported staffing challenges (illness, long-term substitutes) with frequent changes in caregivers, which is likely due to the impact of COVID-19. Another possible reason is that children determined eligible during the school closures of 2020–2021 were assessed upon entry through parent reports and virtual assessments and, upon return to in-person programming, were given a more accurate assessment. These differences between entry and exit assessment practices may have affected results. For example, this cohort had higher entry scores than previous years, resulting in a higher percentage of children in trajectory E, which is not included in Summary Score 1 (SS1). Similarly, a significant number of the exit scores of children who entered as a 6 or 7 were scored as functioning lower upon exit once back in an in-person learning arrangement, resulting in children being categorized as As and Bs, which are also not included in the SS1.

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)

YES

Sampling Question	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)

NO

If no, provide the criteria for defining "comparable to same-aged peers."

The Teaching Strategies Gold (TSG) assessment system is used as a formative, developmental, and criterion-referenced assessment. The platform utilizes teacher documentation and ratings of children's performance to reflect their performance based on widely held expectations (i.e., the criterion-referenced measure) of children's skills, developed by panels of experts using the latest developmental theory and research. Widely held expectations are the range of knowledge, skills, and abilities children would be expected to demonstrate for each domain, objective, and dimension over a school-year period. Teachers rate children's performance on learning objectives and are given the child's developmental performance. TSG translates the range of possible selections into Child Outcomes Summary process scores of 1–7 used for entry and exit data. A score of 6 or 7 is defined as functioning comparably to same-aged peers.

List the instruments and procedures used to gather data for this indicator.

The currently identified tool used to collect, house, and generate Preschool Child Outcomes data is Teaching Strategies Gold. Upon enrollment in a school district, each child with a disability is to have an electronic portfolio in which teachers document the child's performance of progress through observational notes, photos, and videos. Teachers are required to score students at three separate times during the school year (checkpoints) by assigning performance levels relative to each piece of documentation gathered for each learning domain, such as social-emotional skills, literacy, language, mathematics, science, and self-help skills. This data is used for the Child Outcomes Summary to represent the percentage of children demonstrating age-level expectations resulting from special education services and programming. Early Childhood Special Education state staff review documentation status to support PEAs in the completion of checkpoints and to ensure that all data for children who leave special education and transition to kindergarten will be included in the outcomes data.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

(20 U.S.C. 1416(a)(3)(A))

Data Source

State selected data source.

Measurement

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

Instructions

*Sampling **of parents from whom response is requested** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)*

Describe the results of the calculations and compare the results to the target.

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	NO

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

Historical Data

Baseline Year	Baseline Data
2020	91.47%

FFY	2016	2017	2018	2019	2020
Target >=	61.00%	63.00%	65.00%	67.00%	91.47%
Data	85.22%	92.84%	92.87%	93.04%	91.47%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	91.87%	92.27%	92.67%	93.07%	93.47%

FFY 2021 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
19,542	21,402	91.47%	91.87%	91.31%	Did not meet target	No Slippage

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

Every parent who has a child with an IEP has the opportunity to complete the survey using the web-based data collection system. Thus, a census of parents of preschool- and school-age children may complete the survey. The survey completed by parents of children with an IEP in preschool is the same survey completed by parents of children with an IEP in all age groups. Sharing the same questions for all age groups supports the State's ability to combine the data confidently and generalize the results to its overall target population.

The number of parents to whom the surveys were distributed.

146,288

Percentage of respondent parents

14.63%

Response Rate

FFY	2020	2021
Response Rate	14.31%	14.63%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

In an effort to increase response rates year over year, ADE/ESS has created an online portal for PEAs to self-monitor the number of parents who have completed the survey. This portal also allows the coordinator to view any discrepancies between the response rates of various subgroups in the State. For example, if one or more subgroups are out of proportion to the target group, the coordinator works with specific PEAs on plans to increase the response rates among underrepresented groups.

ADE/ESS also collaborates with Raising Special Kids (RSK), the state's Parent Training and Information Center. RSK delivers consistent notices in its weekly e-newsletter and direct parent contact through workshops and personalized consultation. To increase the response rate, particularly for underrepresented populations, RSK plans to expand to statewide, disability-specific, and ethnic community-based organizations. For example, they have begun working with the Refugee Asylee Mentorship Program (RAMP). In this program, RSK family support specialists provide guidance and resources to the families in their preferred language. ADE/ESS will coordinate with the RSK family support specialist to explain the parent engagement survey. The RSK family specialist aims to translate the survey and ensure its completion.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

ADE/ESS conducted an analysis of the parent survey results to detect any possible nonresponse bias. Demographic categories explored included gender, race/ethnicity, and educational environment of the survey responder's child. The method used to analyze the data was to compare the rate of nonresponders to the overall make-up and model of the State (i.e., the population of special education students). The outcome of the analysis showed that, for each demographic category, there was less than a 1% difference between the percentage of nonresponders and the corresponding percentage of the State's population of special education students. These results indicate that there was no apparent bias skewed toward nonresponders because the rate of nonresponders closely matched the apportion of the State's population of special education students in the categories of gender, race/ethnicity, and educational environment.

Include the State's analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

The FFY 2021 response rate by race and ethnicity is listed in the table below.

Race/Ethnicity ………………………… Percent Responded …… Population …… Difference
American Indian or Alaska Native ………… 4.56% ……………… 5.26% ………….. -0.70
Asian ………………………………………… 1.66% ……………… 1.36% …………..+0.30
Black or African American …………………….. 4.76% ……………… 6.31% ………….. -1.55
Hispanic/Latino ……………………………… 48.23% …………… 46.77% …………. +1.46
Native Hawaiian or Pacific Islander ………… 0.18% ……………... 0.28% …………... -0.10

Two or More …………………….………….. 3.86% ……………... 3.93% .... -0.07
White ……………………………..…………….. 36.84% …………… 36.09% …………+0.75

The FFY 2020 response rate by race and ethnicity is listed in the table below.

Race/Ethnicity …………………………. Percent Responded …… Population …… Difference
American Indian or Alaska Native …………. 4.33% ……………… 5.14% ………….. -0.81
Asian …………………………………………. 1.56% ……………… 1.29% …………..+0.27
Black or African American …………………. 4.41% ……………… 5.86% …………. -1.45
Hispanic/Latino ……………………………… 45.22% …………… 45.86% …………. -0.64
Native Hawaiian or Pacific Islander ………… 0.16% …………….. 0.22% ………….. -0.06
Two or More ………………….…………….. 4.92% ……………... 5.14% .... -0.22
White ……………………………..…………….. 39.40% …………… 36.49% …………+2.91

The FFY 2021 response rate by the age of the child is listed in the table below.

Age of Child …………………………. Percent Responded …… Population …… Difference
Ages 3–5 ………………………………………. 10.33% ……………… 9.63% ………..… +0.70
Ages 6–13 ……………………………………. 60.20% ……………… 59.49% ……….. +0.71
Ages 14–22 ………………………………… 29.47% …………….. 30.88% ………. -1.41

The FFY 2020 response rate by the age of the child is listed in the table below.

Age of Child …………………………. Percent Responded …… Population …… Difference
Ages 3–5 ………………………………………. 11.32% ……………… 10.14% ………. +1.18
Ages 6–13 ……………………………………. 60.31% ……………… 59.60% ……….. +0.71
Ages 14–22 ………………………………… 28.37% …………….. 30.26% ………. -1.89

The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)
YES

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).
The metric used to determine representativeness is +/- 3%. Parents were given a specific code to ensure that reliable demographic information was collected. That code was linked directly to the school's Student Information System (SIS). Upon entering the code into the parent survey, only the questions related to the parent survey are shown on the screen. All other information, such as demographic information, was stored within the survey. The State extracted a report from the survey and reviewed the demographic information relating to the parent's child's age and race/ethnicity. The State specifically analyzed this information to determine if there was a +/- 3% discrepancy. The State found that the race/ethnicity were representative within +/- 3% of the children receiving special education services in Arizona.

Sampling Question	Yes / No
Was sampling used?	NO

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, provide a copy of the survey.	

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions
None

8 - OSEP Response

8 - Required Actions

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

285

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	454	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

1. The following calculation method is used:
a.   Risk Ratio method
b.   Alternate Risk Ratio method: used for any PEA that does not meet the minimum cell size or minimum n-size. The alternate risk ratio compares the risk of a specific outcome for a specific group within the PEA with the state ratios for that specific group.

2.   The threshold at which disproportionate representation is identified: 3.0 and above

3.   The number of years of data used in the calculation: 3 years

4.   The minimum cell and/or n-size:
•Minimum n (risk denominator) size = 30
•Minimum cell (risk numerator) size = 10

Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Arizona ensures that PEAs' policies, procedures, and practices are reviewed, as required by 34 CFR §§ 300.173, 300.600(d)(3), and 300.602(a). The data is analyzed annually, and PEAs may be flagged each year for overrepresentation, according to the State's definition of disproportionate representation. The SEA continuously monitors the policies, procedures, and practices of the PEA to determine if a disproportionate representation is the result of inappropriate identification.

Arizona requires all PEAs to maintain special education policies and procedures in compliance with the requirements of 34 CFR §§ 300.11, 300.201, and 300.301 before Part B IDEA Entitlement Grant funds can be approved by ADE/ESS. ESS/Program Support & Monitoring (PSM) reviews PEA policies and procedures in year 1 and year 4 of the six-year programmatic monitoring cycle. If the PEA makes any changes to the policies and procedures, the PEA must resubmit them to the State for review and acceptance.

Upon completion of the reviews, Arizona determined whether the impacted PEAs complied with IDEA requirements that pertain to the PEA's child find, evaluation, and eligibility practices. None of the identified PEAs had policies, procedures, or practices that contributed to disproportionate representation.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

 (20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, or all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

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Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
12	0	305	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

1. The following calculation method is used:
a.   Risk Ratio method
b.   Alternate Risk Ratio method: used for any PEA that does not meet the minimum cell size or minimum n-size. The alternate risk ratio compares the risk of a specific outcome for a specific group within the PEA with the state ratios for that specific group.

2.   The threshold at which disproportionate representation is identified: 3.0 and above

3.   The number of years of data used in the calculation: 3 years

4.   The minimum cell and/or n-size: Minimum n (risk denominator) size = 30
Minimum cell (risk numerator) size = 10

Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Arizona ensures that PEAs' policies, procedures, and practices are reviewed, as required by 34 CFR §§ 300.173, 300.600(d)(3), and 300.602(a). The data is analyzed annually, and PEAs may be flagged each year for overrepresentation, according to the State's definition of disproportionate representation. The SEA continuously monitors the policies, procedures, and practices of the PEA to determine if a disproportionate representation is the result of inappropriate identification.

Arizona requires all PEAs to maintain special education policies and procedures in compliance with the requirements of 34 CFR §§ 300.11, 300.201, and 300.301 before Part B IDEA Entitlement Grant funds can be approved by ADE/ESS. ESS/Program Support & Monitoring (PSM) reviews PEA policies and procedures in year 1 and year 4 of the six-year programmatic monitoring cycle. If the PEA makes any changes to the policies and procedures, the PEA must resubmit them to the State for review and acceptance.

Upon completion of the reviews, Arizona determined whether the impacted PEAs complied with IDEA requirements that pertain to the PEA's child find, evaluation, and eligibility practices. None of the identified PEAs had policies, procedures, or practices that contributed to disproportionate representation.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

Compliance indicator: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State's timeline for initial evaluations.

Measurement

> a. # of children for whom parental consent to evaluate was received.
> b. # of children whose evaluations were completed within 60 days (or State-established timeline).
> Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.
>
> Percent = [(b) divided by (a)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child's previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	96.17%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	94.63%	97.29%	97.69%	97.64%	96.17%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
817	794	96.17%	100%	97.18%	Did not meet target	No Slippage

Number of children included in (a) but not included in (b)

23

Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

FFY 2021 Noncompliance

Range of days beyond the timeline: 1–247
Mean: 40.9
Median: 24
Mode: 30–3 Occurrences

Reasons for the delays included
•Unavailability of student* (absences, illness, etc.) (5)
•Miscalculation of 60-day timeline (4)
•Lack of understanding of the evaluation process (4)
•Shortage of evaluators (4)
•Interruption in school calendar (1)
•Lack of tracking system (1)
•State allowable extension agreement not confirmed in writing by parent (1)
•COVID-19-related illness or unavailability of one or more required team members due to COVID-19 (3)

The reason for the longest delay (247 days) was a lack of an internal tracking system. The system in place relied on a single person who left the entity, and there was no transition in staff to ensure that the process was completed.

* Unavailability of student does not include the parent of a child repeatedly failing (or refusing) to produce the child for evaluation.

Indicate the evaluation timeline used:

The State established a timeline within which the evaluation must be conducted

What is the State's timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).

Per Arizona Administrative Code (AAC) R7-2-401(E)(5), the 60-day evaluation period may be extended for an additional 30 days, provided it is in the best interest of the child and if the parent and PEA agree in writing to such an extension. The SEA considers a written agreement of extension to be compliant with the required timeline within which the evaluation must be conducted. All cases that fall within these parameters would be considered to be completed on time.

What is the source of the data provided for this indicator?

State monitoring

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The data for Indicator 11 is collected from the Arizona Monitoring System. The PEAs were selected based on cycle year as a result of a score on the risk analysis tool and by using data from a review of the agency's data, including data from the SPP/APR, dispute resolution results, audit findings, and annual determinations. PEAs selected for monitoring may complete a self-review of files for Indicator 11 in conjunction with verification by the SEA, or the student files may be reviewed collaboratively with the PEA and SEA staff. During the file review, the reviewer (PEA verified by SEA or SEA and PEA together) will ensure that the 60-day initial evaluation timeline has been met by reviewing the date of the parental consent to collect additional data and the date of the eligibility determination. The review will ensure that these dates are within 60 calendar days of each other or 90 days if there is a written agreement to an extension.

Data Collection
Data is collected from the selected PEAs during the State's differentiated monitoring system based on their cycle year data, use of a risk assessment tool, and other factors described above.
The data that Arizona collected and reported for this Indicator includes a representative sample of children for whom initial evaluations were current at the time of the review during the 2021–2022 school year monitoring activities.

Valid and Reliable Data
ADE/ESS ensures the validity and reliability of the data as it is collected, maintained, and reported through the State monitoring system. Training is provided to all ESS/Program Support and Monitoring (PSM) specialists who monitor to ensure inter-rater reliability on compliance calls based on regulatory requirements. The ADE/ESS staff conduct trainings for PEA staff who will participate in monitoring. The ESS/PSM specialists validate and verify the data through on-site visits or desk audits.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
11	3	5	3

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

Arizona has adjusted its reporting of correction of findings of noncompliance to conform with the SEA corrective action process, which is administered at the PEA level rather than at the individual student level. In the monitoring year 2020–2021, 11 PEAs had noncompliance that accounted for 21 individual student instances of noncompliance. The ESS/PSM specialists reviewed the child-specific files from the PEAs that participated in programmatic monitoring to determine that the PEAs completed the evaluation for any child whose initial evaluation was not timely unless the child was no longer within the PEA and documented through the Corrective Action Plan (CAP) closeout process within one year of identification of noncompliance. The ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits and verified that the PEAs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) related to the evaluation process in conformity with 34 CFR § 300.301 (c)(1) and consistent with OSEP Memo 09-02 (2008). OSEP Memo 09-02 (2008) can be found on the IDEA website at: https://sites.ed.gov/idea/idea-files/osep-memo-09-02-reporting-on-correction-of-noncompliance/.

Describe how the State verified that each *individual case* of noncompliance was corrected

Arizona used specific methods to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and correctly implemented the regulatory requirements based on subsequent file reviews of updated data:

• ESS/PSM specialists conducted follow-up visits and/or desk audits after the monitoring to verify the correction of all instances of noncompliance, including those that were child-specific. The specialists reviewed the child-specific files to determine that the evaluation was completed within 60 calendar days from the date of written notification of noncompliance. The specialist also ensured that the files were documented and verified through the CAP closeout process.

• ESS/PSM specialists reviewed data from subsequent files and/or conducted interviews with the special education administrators during follow-up visits and/or desk audits to determine if all instances of noncompliance, including those that were child-specific, were corrected and to ensure the ongoing sustainability of the implementation of the regulatory requirements regarding initial evaluations.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Systemic correction and sustainability of compliance have not been evidenced for three PEAs from FFY 2020. These entities have been placed on an IDEA federal funding hold as enforcement action to encourage the PEA to comply with the requirements. All PEAs have evidenced correction of all individual instances of noncompliance during the programmatic monitoring activities but have yet to evidence systemic correction through the review of subsequent student files. ADE/ESS changed this reporting in the FFY 2020 APR submission to reflect entity-level reporting based on feedback from national technical assistance centers that data should only be included as corrected when both prongs of OSEP 09-02 (2008) memo have been evidenced. Due to this change, Arizona has updated the data associated with the verification of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	1	1	0

FFY 2019

Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

Arizona verifies correction in accordance with OSEP Memo 09-02 (2008). ESS administers a programmatic monitoring system in which identified noncompliance or incorrect implementation of specific regulatory requirements is determined through a review of data collected during programmatic monitoring activities. The system requires the correction of individual instances of noncompliance and systemic correction evidenced using subsequent PEA files. ESS/PSM specialists review all individual instances of student-level noncompliance with every PEA in which noncompliance was identified during programmatic monitoring. Systemic correction is evidenced through ESS specialist reviews of subsequent student files (newly completed evaluations) presented by the PEA. These files are reviewed to ensure that the initial evaluation timeline is met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction.

Describe how the State verified that each *individual case* of noncompliance was corrected

Regarding FFY 2019 correction, for any PEA that did not exceed its one-year CAP timeline, the PEA could have completed subsequent evaluations during the 2021–2022 school year. All individual instances of noncompliance have evidenced correction through a review of corrected student files by the SEA. All systemic correction, including those after one year, have evidenced correction through a review of subsequent files where 100% compliance was observed. Entities that exceeded the one-year timeline have had enforcement applied, which may include the interruption of IDEA federal funds. The Arizona State Board for Charter Schools also works with charter schools in Arizona to apply enforcement to support compliant systems.

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021

SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

Arizona verifies correction in accordance with OSEP Memo 09-02 (2008). ESS administers a programmatic monitoring system in which identified noncompliance or incorrect implementation of specific regulatory requirements is determined through a review of data collected during programmatic monitoring activities. The system requires the correction of individual instances of noncompliance and systemic correction evidenced using subsequent PEA files. All individual instances of student-level noncompliance are reviewed by ESS/PSM specialists with every PEA in which noncompliance was identified during programmatic monitoring. Systemic correction is evidenced through ESS specialist reviews of subsequent student files (newly completed evaluations) presented by the PEA. These files are reviewed to ensure that the initial evaluation timeline is met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction.

For FFY 2019 correction, for any PEA that did not exceed its one-year CAP timeline, the PEA could have completed subsequent evaluations during the 2021–2022 school year. All individual instances of noncompliance have evidenced correction through a review of corrected student files by the SEA. All systemic correction, including those after one year, have evidenced correction through a review of subsequent files where 100% compliance was observed. Entities that went past the one-year timeline have had enforcement applied, which may include the interruption of IDEA federal funds. The Arizona State Board for Charter Schools also works with charter schools in Arizona to apply enforcement to support compliant systems.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

> a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
> b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
> c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
> d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
> e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
> f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	97.29%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.07%	98.78%	99.27%	96.36%	97.29%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,217
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	374

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,725
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	95
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	13
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,725	2,735	97.29%	100%	99.63%	Did not meet target	No Slippage

Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f

10

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Reasons for Delay
Late referral from Part C: 6
Interruption of school schedule: 1
Shortage of school personnel: 3
Total = 10

In FFY 2021, a total of 10 children did not transition on time due to three primary reasons: first, the largest area of delay was Late Referral from Part C (6). Second, the result of a Shortage of School Personnel (3); and third, due to Interruption of the School Schedule (1).
Overall, the State had more children referred from Part C than the prior year. While the number of Late Referrals from Part C increased by two (2), consistent collaboration and communication have occurred between the Part C and Part B agencies. The most significant changes were within the area of Interruption of the School Schedule, reduced from the previous year by a large margin (from 62 to 1). The dissemination of the Policy and Procedure document and Technical Assistance sessions describing the requirements may have helped change these results. Delays due to a Shortage of School Personnel increased slightly from 1 to 3 in a year-to-year comparison. This may result from difficulties with hiring and retaining personnel due to COVID-19. Activities designed to increase the availability of special education personnel include work to disseminate Recruitment and Retention strategies around early childhood within the Comprehensive System of Personnel Development (CSPD) work.

Range of days Beyond the Third Birthday
Range of Days: 3 to 420 days

Attach PDF table (optional)

What is the source of the data provided for this indicator?

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

Data Source
The data for Indicator 12 is reported annually by all PEAs in Arizona that have children who transition from Part C to Part B. Data is included for the entire reporting year, from July 1, 2021, through June 30, 2022.

Data Collection
The data is collected through the Annual Special Education Data Collection, an Arizona Department of Education (ADE) Web-based data collection system.

Valid and Reliable Data
The ADE/ESS Early Childhood Special Education (ECSE) and Program Support and Monitoring (PSM) unit specialists ensure the validity and reliability of the data as it is collected, maintained, and reported using internal edit checks. Training is provided to school personnel by the ADE/ESS Data Management unit regarding the operation of the data system and interpretation of the questions that are components of the measurement. The State requires an assurance from PEAs through the submission of a signed form attesting to the validity of the data. Random verification checks require that a selected district submit a copy of the front page of the IEP that shows the date of the IEP and the child's birthday for children that transitioned from early intervention service or a prior written notice (PWN) of children found ineligible by the child's third birthday.

Definition of Finding
A finding of noncompliance for Indicator 12 is based on the PEA's self-reported submission in the Web-based data collection system. When a PEA self-reports noncompliance, the SEA verifies the correction of all self-reported noncompliance.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
68	68	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

All instances of noncompliance were verified for each PEA with noncompliance indicated in FFY 2019 for this indicator:

1. The PEA correctly implemented the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system
a) Subsequent PEA data is sent to the SEA and reviewed for compliance
b) SEA (Part C and B) transition policies are reviewed to ensure sufficient and accurate messaging
c) Upon notification of delays, the SEA provides timely feedback to Part C and PEAs to intervene
d) Each of the PEAs submits In-by-3 policies and procedures for review and feedback

2. Has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the PEA, consistent with OSEP Memo 09-02 (2008).
a) Each PEA submits the cover page of the IEP for each child not found eligible by their third birthday to ensure that the child was provided with an IEP or was provided with a Prior Written Notice (PWN) for those children when found ineligible for special education.

All noncompliance from FFY 2020 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists, in conjunction with ADE/ESS Early Childhood Special Education specialists, through student file review from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made. Systemic correction is evidenced through subsequent file review. Subsequent files reviewed evidence 100% compliance to ensure sustainability and systemic correction.

Describe how the State verified that each *individual case* of noncompliance was corrected

The specific methods Arizona used to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and were correctly implementing the regulatory requirements, based on subsequent file reviews of updated data, include the following actions:
• The ADE/ESCE and PSM specialists reviewed the written process and procedures for the PEA's early intervention transitions, including those that were collaboratively developed and agreed upon with AzEIP service coordinators.
• The ADE/ECSE specialists and PSM specialists reviewed student data during subsequent visits and/or desk audits of updated data to determine if the PEAs corrected all instances of noncompliance, including child-specific instances, and to ensure ongoing sustainability with the implementation of the regulatory requirements.

All noncompliance from FFY 2020 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists, in conjunction with ADE/ESS Early Childhood Special Education specialists, through student file review from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made. Systemic correction is evidenced through subsequent file review. Subsequent files reviewed evidence 100% compliance to ensure sustainability and systemic correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances

of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made.

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

 (20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	61.94%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	85.61%	83.96%	81.97%	78.03%	61.94%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
320	491	61.94%	100%	65.17%	Did not meet target	No Slippage

What is the source of the data provided for this indicator?

State monitoring

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

Data Source
The data for Indicator 13 is compiled from the Arizona programmatic monitoring system. The SEA selects PEAs for programmatic monitoring on a cycle basis, differentiating the activities based on a risk analysis tool, including data from the SPP/APR, dispute resolution, audit findings, and annual determination. Both the reported number of youths with IEPs, aged 16 and above, and the number of youths aged 16 and above with IEPs that contain each of the required components for secondary transition reflect the number of files reviewed each year by the Arizona programmatic monitoring system. PEAs selected for monitoring may complete a self-review of files for Indicator 13 in conjunction with verification by the SEA, or the student files may be reviewed collaboratively with the PEA and SEA staff together. During the file review, the reviewer (PEA verified by SEA or SEA and PEA together) will ensure that all eight secondary transition components are included.

Each year contains a different cohort of PEAs, and some PEAs only serve elementary grades. Thus secondary transition would not be part of a sample. This selection criterion provides a varied sample makeup and size.

The National Technical Assistance Center on Transition (NTACT) Indicator 13 Checklist was used as a guide for the eight components that comprise the monitoring line item from which the data is pulled. The eight components are:
 • Measurable postsecondary goals
 • Postsecondary goals updated annually
 • Postsecondary goals based upon age-appropriate transition assessments
 • Transition services
 • Course(s) of study
 • Annual IEP goals related to transition service needs
 • Student invited to IEP meeting
 • Representative of participating agency invited to IEP meeting with prior consent of parent or student who has reached the age of majority.

Data Collection
Data is collected from the selected PEAs through the State's differentiated programmatic monitoring system based on their cycle year data, use of a risk assessment tool, and other factors described above.

The data that Arizona collected and reported for this Indicator includes a representative sample of children aged 16 at the time of review and who had a current IEP at the time of the review during the 2021–2022 school year monitoring activities.

Valid and Reliable Data
ADE/ESS assures the validity and reliability of the data as it is collected, maintained, and reported through the State programmatic monitoring system. Training is provided to all ESS/Program Support and Monitoring (PSM) specialists who monitor to ensure inter-rater reliability for compliance calls, according to regulatory requirements. ADE/ESS staff conducts trainings for PEA staff who will participate in programmatic monitoring. ESS specialists validate and verify the data through on-site visits or desk audits.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	NO

Provide additional information about this indicator (optional)

Arizona State Board Rule R7-2-401 G outlines the requirements for an IEP and states that an IEP will include all required components under state and federal requirements. State statute A.R.S 15-761 11 states: "Individualized education program" means a written statement, as defined in 20 United States Code sections 1401 and 1412, for providing special education and related services to a child with a disability. Neither state board rule nor state statute requires transition plans to be developed before the federally mandated age.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
43	23	13	7

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

ADE/ESS Program Support and Monitoring (PSM) specialists reviewed the child-specific files from the programmatic monitoring to determine that the PEAs included the eight components of the secondary transition requirements for the student's IEPs unless the child no longer attended the PEA and documented through the Corrective Action Plan (CAP) closeout process within one year of identification of noncompliance. ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits, specifically reviewing the transition requirements in these files for compliance to ensure that the PEAs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) related to secondary transition, in conformity with 34 CFR §§ 300.320(b) and 300.321(b).

In the monitoring year 2020–2021, 43 PEAs had noncompliance that accounted for 177 individual instances of noncompliance. Arizona verifies correction in accordance with OSEP Memo 09-02 (2008).* Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during programmatic monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance (student level) are reviewed in student-specific files by ADE/ESS PSM specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring. Systemic correction is evidenced through ESS/PSM specialist reviews of subsequent student files (newly completed IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction. Provided the PEA did not exceed its one-year CAP timeline, these subsequent files would have been completed by the PEA during the 2021–2022 school year.

Systemic noncompliance in 36 PEAs, including those that exceeded one year post notification of findings, evidenced correction through a review of subsequent files completed by the PEA in which 100% compliance was observed by the PSM specialist through an examination of those files. All individual instances of noncompliance evidenced correction through a PSM review of corrected student files.

Arizona has 7 PEAs that have not been able to evidence systemic correction of this Indicator through a review of subsequent student files, although all individual instances of noncompliance have evidenced correction through a review of corrected student files by the SEA. All these entities have been placed under enforcement, which may include interruption of IDEA federal funds to encourage the PEAs to comply with the requirements.

*OSEP Memo 09-02 (2008) can be found on the IDEA website at: https://sites.ed.gov/idea/idea-files/osep-memo-09-02-reporting-on-correction-of-noncompliance/

Describe how the State verified that each *individual case* of noncompliance was corrected

Arizona used specific methods to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and were correctly implementing the regulatory requirements based on subsequent file reviews of updated data:
 •ESS/PSM specialists conducted follow-up, on-site visits, and/or desk audits after the monitoring to verify the correction of all instances of noncompliance, including those that were child-specific. The specialists reviewed the child-specific files to determine that the PEA included the eight components of the secondary transition requirements for the student's IEPs unless they were no longer under the jurisdiction of the PEA within 60 calendar days from the date of written notification of noncompliance. The specialist also ensured the files were documented and verified through the CAP closeout process.
 • ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits and/or desk audits to determine whether all instances of noncompliance, including those that were child-specific, were corrected and to ensure the ongoing sustainability of the implementation of the regulatory requirements related to secondary transition in conformity with 34 CFR §§ 300.302(b) and 300. 321(b).

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Arizona has 7 PEAs that have not been able to evidence systemic correction of this Indicator through a review of subsequent student files. All individual instances of noncompliance have evidenced correction through a review of corrected student files by the SEA. All these entities have been placed under enforcement, which may include interruption of IDEA federal funds to encourage the PEAs to comply with the requirements. Additionally, where PEAs are charter entities, the Arizona State Board for Charter Schools collaborates with the SEA to support the PEAs in implementing compliant systems.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	6	3	3

FFY 2019

Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

Arizona verifies correction in accordance with OSEP Memo 09-02 (2008). ESS administers a programmatic monitoring system in which identified noncompliance or incorrect implementation of specific regulatory requirements is determined through a review of data collected during programmatic monitoring activities. The system requires the correction of individual instances of noncompliance and systemic correction evidenced using subsequent PEA files. ESS/PSM specialists review all individual instances of student-level noncompliance with every PEA in which noncompliance was identified during programmatic monitoring. Systemic correction is evidenced through ESS specialist reviews of subsequent student files (completed, new IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction.

Describe how the State verified that each *individual case* of noncompliance was corrected

The state uses a web-based application monitoring system that allows the SEA to track data, ensuring that all individual instances are corrected. The SEA verifies the correction through individual student file review. Updated student files are presented for review, which includes a revised IEP and/or addendum to the current IEP.

FFY 2019

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Noncompliant entities have had enforcement applied, which may include the interruption of IDEA federal funds. The Arizona State Board for Charter Schools also works with charter schools in Arizona to apply enforcement to support the implementation of compliant systems. In addition to enforcement actions, the SEA staff meets regularly with these PEAs to review updated documents for compliance and to provide systemic technical assistance to aid the PEA in coming into compliance.

13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining six findings of noncompliance identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

Arizona verifies correction in accordance with OSEP Memo 09-02 (2008). ESS administers a programmatic monitoring system in which identified noncompliance or incorrect implementation of specific regulatory requirements is determined through a review of data collected during programmatic monitoring activities. The system requires the correction of individual instances of noncompliance and systemic correction evidenced using subsequent PEA files. All individual instances of student-level noncompliance are reviewed by ESS/PSM specialists with every PEA in which noncompliance was identified during programmatic monitoring. Systemic correction is evidenced through ESS specialist reviews of subsequent student files (completed new IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction.

For FFY 2019 correction, for any PEA that did not exceed its one-year CAP timeline, the PEA could have completed subsequent files during the 2021–2022 school year. Arizona has 3 PEAs that have not been able to evidence systemic correction of this indicator through a review of subsequent student files. All individual instances of noncompliance have evidenced correction through a review of corrected student files by the SEA. Non-compliant entities have had enforcement applied, which may include the interruption of IDEA federal funds. The Arizona State Board for Charter Schools also works with charter schools in Arizona to apply enforcement to support the implementation of compliant systems.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining seven uncorrected findings of noncompliance identified in FFY 2020, and remaining three uncorrected findings of noncompliance identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020 and FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Results indicator: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

> A. Enrolled in higher education within one year of leaving high school.
>
> B. Enrolled in higher education or competitively employed within one year of leaving high school.
>
> C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

(20 U.S.C. 1416(a)(3)(B))

Data Source

State selected data source.

Measurement

> A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
>
> B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
>
> C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

Instructions

*Sampling **of youth who had IEPs and are no longer in secondary school** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See <u>General Instructions</u> on page 2 for additional instructions on sampling.)*

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. *Definitions*

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under "competitive employment":

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

II. *Data Reporting*

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

> 1. Enrolled in higher education within one year of leaving high school;
> 2. Competitively employed within one year of leaving high school (but not enrolled in higher education);
> 3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);
> 4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

"Leavers" should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, "leavers" who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, "leavers" who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

III. *Reporting on the Measures/Indicators*
Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2020	Target >=	31.10%	32.60%	34.10%	24.30%	18.59%
A	18.59%	Data	22.79%	21.51%	23.80%	21.91%	18.59%
B	2020	Target >=	66.20%	68.20%	70.20%	56.50%	56.22%
B	56.22%	Data	63.55%	61.17%	54.56%	55.35%	56.22%
C	2020	Target >=	78.00%	79.30%	80.60%	75.00%	71.80%
C	71.80%	Data	77.66%	75.27%	73.72%	72.51%	71.80%

FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	19.69%	20.79%	21.89%	22.99%	24.09%
Target B >=	56.72%	57.22%	57.72%	58.22%	58.72%
Target C >=	72.40%	73.00%	73.60%	74.20%	74.80%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three

one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

At the annual Arizona IDEA Conference, an analysis of trend data was presented for Indicators 1, 2, 6, 7, and 14. At these sessions, attendees could ask questions and complete a survey to provide feedback. Another input source for Indicator 14 is from the Post School Outcome (PSO) Workgroup. This group is led by ADE/ESS specialists, who provide trainings throughout the year to PEAs on topics such as the purpose of the survey, best practices for collecting data, and how to analyze results regarding representativeness and levels of engagement. During the January 2023 meeting, members brainstormed strategies to increase response rates. For example, participants stated it would be helpful to create a student list with up-to-date contact information before their students exit high school and to begin gathering responses as soon as the survey window opens to maximize the time allowed to complete the surveys.

FFY 2021 SPP/APR Data

Total number of targeted youth in the sample or census	8,828
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	6,800
Response Rate	77.03%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	1,322
2. Number of respondent youth who competitively employed within one year of leaving high school	2,695
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	495
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	512

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	1,322	6,800	18.59%	19.69%	19.44%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	4,017	6,800	56.22%	56.72%	59.07%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	5,024	6,800	71.80%	72.40%	73.88%	Met target	No Slippage

Please select the reporting option your State is using:

Option 2: Report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Response Rate

FFY	2020	2021

Response Rate	78.72%	77.03%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

ADE/ESS will continue to support PEA staff who administer the PSO survey through the use of statewide and targeted technical assistance and professional development opportunities that share best practice strategies to increase the response rate. ADE/ESS will continue to work directly with PEAs to implement school- and community-specific strategies that encourage survey responses from youths across demographic categories, emphasizing strategies to enhance rates for underrepresented populations. ADE/ESS will also continue to provide current materials and guidance resources that support the use of strategies that increase annual response rates. As with prior years, ADE/ESS will host Focus Group meetings to gather insight into field experiences related to Indicator 14 data collection. Focus group members include special education administrators and school staff supporting PSO efforts.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

ADE/ESS sought to gain unbiased responses from all eligible students in the survey. Thus, the State used a census to collect information. Each PEA was asked to contact every former student who qualified for the survey. If the initial contact was unsuccessful, the PEA was asked to make at least two subsequent attempts. The PEA then submitted documentation to ADE explaining the reason why any surveys were incomplete. This method gave equal attention to all subgroups, thus reducing potential nonresponse bias.

ADE/ESS provided targeted outreach for PEAs with 20% or higher occurrences of not-contacted former students. Documented reasons for the failure to contact these students included an inability to contact after multiple attempts, incorrect contact information, or the responder refused to complete the FFY 2021 survey. Targeted outreach included email or phone correspondence to provide best practice strategies and technical assistance in addressing barriers to reaching all eligible former students.

Respondents to the FFY 2021 survey were underrepresented in the population of youths who dropped out of school. Of those youths who dropped out of school, 56% responded to the survey. This percentage of youths who dropped out increased from 51% in FFY 2020. ADE/ESS will continue to work with PEAs to identify strategies to encourage survey responses from youths in the dropout category and ensure that PEAs are collecting contact information while students are still enrolled in school.

Include the State's analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in its analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

ADE/ESS used the Response Calculator developed by the National Technical Assistance Center on Transition (NTACT) to calculate the representativeness of the respondent group on the characteristics of (a) disability type, (b) race/ethnicity, (c) gender, and (d) exit status (e.g., dropout). This calculation determined whether the youths who responded to the interviews were similar to or different from the total population of youths with an IEP who exited school during the school year 2020–2021. The calculation uses a plus or minus 3 percentage point difference to determine if survey responses are representative of the population. For example, if 40% of the population were Hispanic, we would expect the percentage of surveys received by Hispanic youths to fall 3 points in either direction, i.e., between 37% and 43%. This type of analysis helps determine whether one group is over- or underrepresented. No significant differences were found by disability type, race/ethnicity, or gender; however, differences were found in response rates based on exit type. Exiters who dropped out (response rate=16.93%) were below the 3-point range to be representative of the population, and exiters who graduated (response rate= 82.91%) were above the 3-point range to be representative.

The FFY 2021 survey response rate was 6,800 of the 8,828 youths eligible to take the survey, or 77.03% of leavers. This rate is slightly lower than the previous year (FFY 2020 response rate was 78.72%). The total number of youths who were eligible was adjusted to reflect those who had returned to school, were deceased, or whose data was uploaded by the PEA to the system in error.

FFY 2021 PSO Survey Responses by exit status are listed in the table below.

Exit Status	Percent Responded	Population	Difference
Dropped Out	16.93%	23.46%	-6.53
Graduated	82.91%	76.35%	+6.56
Reached Maximum Age	0.16%	0.19%	-0.03

FFY 2020 PSO Survey Responses by exit status are listed in the table below.

Exit Status	Percent Responded	Population	Difference
Dropped Out	11.13%	17.16%	-6.03
Graduated	88.82%	82.77%	+6.05
Reached Maximum Age	0.05%	0.08%	-0.03

In FFY 2020, there was an underrepresentation of responders who dropped out (difference of 6.03 percentage points). This gap increased slightly when compared to the responders who dropped out in FFY 2021 (difference of 6.53 percentage points). Also, in FFY 2020, there was an overrepresentation of responders who graduated (difference of 6.05 percentage points). This gap increased slightly when compared to the responders who graduated in FFY 2021 (difference of 6.56 percentage points).

The FFY 2021 survey response rate was 6,800 of the 8,828 youths eligible to take the survey, or 77.03% of leavers. This rate is slightly lower than the previous year (FFY 2020 response rate was 78.72%). The total number of youths who were eligible was adjusted to reflect those who had returned to school, were deceased, or whose data was uploaded by the PEA to the system in error.

FFY 2021 PSO Survey Responses by exit status are listed in the table below.

Exit Status	Percent Responded	Population	Difference
Dropped Out	16.93%	23.46%	-6.53
Graduated	82.91%	76.35%	+6.56

Reached Maximum Age …………………. 0.16% ……….......... 0.19% ……..... -0.03

FFY 2020 PSO Survey Responses by exit status are listed in the table below.

Exit Status ………………………… Percent Responded …… Population …… Difference
Dropped Out ………………………………. 11.13% ………….... 17.16% ………. -6.03
Graduated ……………………………….... 88.82% ……….….... 82.77% ……....+6.05
Reached Maximum Age …………….......... 0.05% ……….…..... 0.08% ……..... -0.03

FFY 2021 PSO Survey Responses by race and ethnicity are listed in the table below.

Race/Ethnicity ………………………… Percent Responded …… Population …… Difference
American Indian or Alaska Native …………. 6.60% ……………... 6.52% …………. +0.08
Asian …………………………………….... 1.07% …………….... 0.99% ……….…+0.08
Black or African American ……………….... 6.41% …………….... 7.07% …………. -0.66
Hispanic/Latino ……………………………. 45.31% …………... 44.37% ………… -0.94
Native Hawaiian or Pacific Islander …………0.18% ……………... 0.18% ………….. -0.00
Two or More ……………………..………….... 4.12% …………….....4.52% .... -0.46
White ………….………….……………….. 36.31% …………….. 36.35% …………-0.04

FFY 2020 PSO Survey Responses by race and ethnicity are listed in the table below.

Race/Ethnicity ………………………… Percent Responded …… Population …… Difference

American Indian or Alaska Native …………. 6.34% ……………... 6.08% …………. +0.26
Asian ………………………………………... 0.99% ……………... 0.97% ………….+0.02
Black or African American ……………….... 6.20% ……………... 6.82% …………. -0.62
Hispanic/Latino ……………………………. 44.95% …………….. 44.62% ………… +0.33
Native Hawaiian or Pacific Islander ………… 0.18% ……………... 0.15% ………….. +0.03
Two or More ……………………..…………... 4.34% ……………... 4.80% …………. -0.46
White ………….……………..……………... 37.01% …………….. 36.56% …………+0.45

In both FFY 2020 and FFY 2021, all ethnic and racial subgroups were represented within +/- 3% of the target population.

The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

Respondents were representative of 2020–2021 target leavers based on gender, race/ethnicity, and category of disability; however, they were not representative of 2020–2021 target leavers based on their exit status. Students who graduated were overrepresented by 6.56 percentage points, and youths who dropped out of school were underrepresented by 6.53 percentage points compared to the target leaver group. ADE/ESS will continue its efforts to increase response rates, especially among youths who drop out. PEAs are expected to utilize effective practices to collect survey responses for all eligible former students successfully. ADE/ESS identifies effective practices through PEA outreach, the provision of professional learning opportunities, and collaborative activities, such as statewide Focus Group meetings. ADE/ESS plans to continue disseminating strategies confirmed as effective practices for PEAs to increase response rate and representativeness, such as early identification and reconnection with a former student who dropped out. A targeted outreach initiative is established at the end of each data collection season and utilized to identify PEAs that may benefit from enhanced technical assistance and support. PEAs utilizing this strategy have increased response rates for eligible former students who dropped out. Increasing the response rate of students who drop out will, in turn, address the overrepresentation of the response rate from youths who graduated. ADE/ESS will also continue communicating with PEAs who successfully contact youths who dropped out to create a list of practices and strategies to share statewide during training opportunities. ADE/ESS also encourages targeted PEAs to connect regionally and statewide to identify new or enhanced strategies for reaching youths who dropped out.

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

The State uses +/- 3% as the metric to determine representativeness. According to the NTACT Response Calculator, differences between the respondent group and the target leaver group of +/- 3% are important. Negative differences indicate an underrepresentation of the group, and positive differences indicate overrepresentation.

Sampling Question	Yes / No
Was sampling used?	NO
Survey Question	**Yes / No**
Was a survey used?	YES
If yes, is it a new or revised survey?	NO

Provide additional information about this indicator (optional)

Data Source and Collection Methods:
During FFY 2021, 286 PEAs had leavers who met the criteria (youths with a current IEP who aged out, graduated, or dropped out) for participation in the PSO Survey. Of this number, 181 PEAs (63%) that were required to participate in PSO data collection had ten or fewer leavers, while 24 PEAs (8.4%) had 100 or more leavers. A total of 8,828 former students statewide were eligible to take the PSO Survey during the FFY 2021 data collection period. Of the 286 PEAs required to participate in the PSO Survey, 266 (93%) completed data collection requirements. In addition, 152 PEAs (53%) had a

response rate of 80% or more from their targeted leavers. A detailed breakdown of the FFY 2021 statewide PSO results, including response rate/representativeness, is available on the ADE/ESS website: https:///www.azed.gov/specialeducation/transition/post-school-outcomes/, under the heading titled "Results from the Survey."

For PEAs to communicate with former students about the PSO survey, they gather contact information on student leavers so they can reach these leavers the following year. Schools either input the data into the online PSO data collection system or maintain student contact information locally for use the next year. The PSO data collection system uses a secure application as part of ADEConnect, a secure, single sign-on identity management system. The application includes an auto-population of student demographic information and exit reason imported from the Arizona Educational Data Standards (AzEDS), a web-based system for reporting all student-level details to the ADE. PEAs designate school personnel to contact former students, designated family members (e.g., parents, grandparents, guardians), or state agency representatives to conduct phone interviews and input survey data into the online PSO data collection system. Individuals who could respond to the PSO survey were contacted between June 1 and September 30, 2022, after former students were out of school for at least one year.

Missing Data:
Arizona's PSO Survey response rate for FFY 2021 was 77.03% (8,828 former students eligible for contact and 6,800 respondents). Arizona's PSO Survey response rate for FFY 2021 is consistent with prior years. However, the FFY 2021 PSO Survey is missing data on 2,068 former students, or 22.07% of the leavers, which is consistent with FFY 2020. An analysis of FFY 2021 results indicated that missing data was the result of four major factors:
• Schools were not able to contact leavers after three attempts (1,147 former students or 16.8%)
• Schools did not have correct contact information for leavers (405 former students or 5.9%)
• The respondents refused to participate (315 former students or 4.6%)
• Schools did not collect contact information for leavers (66 former students or 0.9%)

14 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2020 SPP/APR

The SEA included the required FFY 2021 required actions in the above sections.

14 - OSEP Response

14 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

Measurement

Percent = (3.1(a) divided by 3.1) times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

15 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	6
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	2

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

Historical Data

Baseline Year	Baseline Data
2005	57.90%

FFY	2016	2017	2018	2019	2020
Target >=	67.00%	68.00% - 78.00%	68.00% - 78.00%	68.00%-78.00%	68.00%-78.00%
Data	55.56%	50.00%	75.00%	42.86%	25.00%

Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
2	6	25.00%	68.00%	78.00%	33.33%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to meet its targets until any fiscal year in which ten or more resolution sessions were held.

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

Measurement

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

16 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	27
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	5
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	17

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

Historical Data

Baseline Year	Baseline Data
2005	82.00%

FFY	2016	2017	2018	2019	2020
Target >=	78.00%	74.00% - 84.00%	74.00% - 84.00%	74.00%-84.00%	74.00%-84.00%
Data	57.50%	77.08%	81.82%	72.55%	82.14%

Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%

FFY 2021 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
5	17	27	82.14%	74.00%	84.00%	81.48%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Measurement

The State's SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

Instructions

Baseline Data*:* The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Children with Disabilities.

Targets*:* In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

Phase I: Analysis:

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

Phase II: Plan (which, is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and

- Evaluation.

Phase III: Implementation and Evaluation (which, is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

Phase III: Implementation and Evaluation

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR)?

By FFY 2025, targeted Public Education Agencies (PEAs) will increase the performance of SSIP students with disabilities in grade 3 on the English Language Arts (ELA) state assessment from 9.58% to 12.23%.

Has the SiMR changed since the last SSIP submission? (yes/no)

NO

Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)

YES

Provide a description of the subset of the population from the indicator.

A cohort of PEAs that meets the state criteria for participation in SSIP is followed for three years and included in the SiMR data.

Is the State's theory of action new or revised since the previous submission? (yes/no)

NO

Please provide a link to the current theory of action.

https://www.azed.gov/sites/default/files/2022/01/SSIP%20Logic%20Model%20and%20Theory%20of%20Action%20-%20FINAL.pdf

Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages).

Select yes if the State uses two targets for measurement. (yes/no)

NO

Historical Data

Baseline Year	Baseline Data
2020	9.58%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	10.11%	10.64%	11.17%	11.70%	12.23%

FFY 2021 SPP/APR Data

The number of grade 3 students with disabilities within SSIP cohort PEAs, receiving a score of Proficient or Highly Proficient, on the ELA component of the state assessment.	The number of grade 3 students with disabilities within SSIP cohort PEAs, receiving a score of Minimally proficient, Partially Proficient, Proficient, or Highly Proficient, on the ELA component of the state assessment.	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
98	892	9.58%	10.11%	10.99%	Met target	No Slippage

Provide the data source for the FFY 2021 data.

State ELA assessment data for Students with Disabilities (SWD) in grade 3, specific to the SSIP-cohort, from Arizona's data systems

Please describe how data are collected and analyzed for the SiMR.

From a list of all grade 3 SWD that have a score on the state ELA assessment in the data systems, the data of students who are associated with a District of Residence Identification (DOR ID) corresponding with PEAs in years 1–3 of SSIP at the time of assessment administration is disaggregated and compiled. Within the compiled list of students, the number of students testing as proficient is added to the students testing as highly proficient, and the resulting number is divided into the total number of SWD receiving any score on the ELA state assessment to calculate the proficiency for SSIP.

Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

At the beginning of SY 2021–2022, the SSIP aligned with the state initiative, Move On When Reading (MOWR). Amongst other collaborative benefits, the alignment allowed the SSIP to begin collecting reliable literacy screener data in grades 1, 2, and 3. While the legislation supporting this data collection did apply to SY 2021–2022, it did not apply to all PEAs beyond that school year. Beginning in SY 2022–2023, new MOWR legislation mandated all PEAs in Arizona to submit literacy screener data in grades K–3 for fall, winter, and spring submission periods yearly. While this legislative change does not mandate that all PEAs report SWD, which would enable the comparison to SSIP-PEA SWD, it will allow the SEA SSIP Team to continue the comparison to all student groups for SSIP and non-SSIP PEAs beyond the SY 2021–2022 data collection period. Analyzing the fluctuations in proficiency for these available groups should further provide context for progress toward the SiMR. In the first year of collection, the only context for comparison is a positive change in the gap between SWD and all student groups within SSIP PEAs and between all student groups within and outside of SSIP PEAs during SY 2021–2022. However, the SEA SSIP Team will have the first opportunity to collect directly comparable progress toward the SiMR when the data from two consecutive spring submission periods have been collected for SSIP-PEA SWD at the end of SY 2022–2023.

Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)

NO

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

https://www.azed.gov/sites/default/files/2022/01/SSIP%20Evaluation%20Plan%20-%20FINAL.pdf

Is the State's evaluation plan new or revised since the previous submission? (yes/no)

YES

If yes, provide a description of the changes and updates to the evaluation plan.

Within the section for Data Reliability, the SEA SSIP Team has included two Evaluation Questions to those that existed previously. The new questions are as follows: 'How does literacy screener data, in comparison to state testing data, help to contextualize progress toward the SiMR and help to drive decisions toward providing additional support?' and 'How does SSIP subgroup data help to contextualize progress toward the SiMR and help to drive decisions toward providing additional support?' "October 1 Data" was added under Data Sources.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

Due to statutory changes and MOWR alignment, the literacy screener data will now be available for two consecutive years at the end of SY 2022–2023. It was recently determined that subgroup data analysis utilizing October 1 Child Count is valuable in providing additional PEA support. Both data sources will help to inform the connection between activity and student outcomes, as defined in the FFY 2021 section for infrastructure improvements.

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:

Activity Form Structure - Success Gaps Rubric & Action Plan (SGR & AP):

A focus for ongoing infrastructure improvements in the past year has been on monitoring the fidelity of implementing core SSIP activities. In accordance with the SSIP Evaluation Plan for data reliability and as a result of ongoing feedback and analysis, it was evident that, although the SGR & AP has shown significant growth in framework fidelity, more could be done to improve the process where PEA SSIP Teams used their self-assessment of organizational, evidence-based practices to target indicators for initiatives and systemic improvement. Expanding narrative form fields was not only an opportunity to address PEA feedback, but it also allowed PEA SSIP Teams more room to explore and document the details of self-assessment and initiative structures and more opportunity for reviewers to assess framework fidelity properly. In turn, this will provide for implementation fidelity as PEA SSIP Teams revisit the document as a guide through the evolution of levels of implementation and initiative progress.

An additional improvement to SGR & AP framework fidelity came from SEA SSIP Team members that use the Fidelity Feedback Guide (FFG) to review the SGR & AP documentation. Previously, when PEA SSIP Teams would complete the evidence section of each SGR indicator, they were guided to either mark a checkbox to indicate that a particular evidence-based practice was currently in practice or accompany any unchecked boxes with a narrative to explore the missing evidence in the Notes section of that indicator. After activity submission, an SEA SSIP Team member would review the SGR & AP with the FFG for feedback to PEA SSIP Teams.

Where reviewers recorded whether it was evident that PEA SSIP Teams considered all evidence-based practices toward marking their level of implementation, it was not clear as to whether a blank checkbox meant that the PEA SSIP Team was indicating that the practice was not currently in place and had forgotten to explore that practice in the Notes section or if the PEA SSIP Team had missed the consideration of that practice before marking their level of implementation.

During School Year (SY) 2022–2023, the replacement of evidence checkboxes with Y/N boxes made reviewing the document for framework fidelity more reliable. As SEA SSIP Teams provide feedback to PEA SSIP Teams, this more reliable feedback can be used to improve fidelity at both the framework and implementation levels.

Activity Support Structure - The SGR & AP and the Evidence-Based Practices (EBP) Walkthrough Process:

Enhancements to professional development and technical support in SY 2022–2023 also provide for implementation fidelity. For example, improved support videos help PEA SSIP Teams through their SGR & AP fall submissions this year. Because only 8% of respondents to the SY 2021–2022 SSIP Survey reported going to the website and using the 20-minute overview video to inform their process, video links to shorter videos have been placed within the document to bolster the directions for both the self-assessment and action initiative process.

The most dynamic enhancement to activity support during this reporting period occurred at the beginning of SY 2022–2023 for PEAs transitioning from Year 1 to Year 2 in the SSIP.

Year 2 PEAs add to their focus of using Evidence-Based Practices (EBPs) in the SGR & AP for systemic improvement at the organizational level with the EBP Classroom Walkthrough activity. For this activity, SEA SSIP Teams collaborate with PEA SSIP Teams toward the systemic improvement of classroom walkthrough systems and classroom EBPs in their learning community.

However, since COVID-19 school closures in the Spring of 2020, and with very few exceptions, PEAs did not allow campus visitation through SY 2021–2022. This meant that the SEA SSIP Team could no longer support implementation fidelity by conducting classroom walkthroughs with PEA SSIP teams nor provide any related onsite support. Through this period, SEA SSIP Teams could only provide activity support virtually through collaboration before and after classroom walkthroughs. In SY 2022–2023, as PEAs again allowed for campus visitation, the SEA SSIP Team was able to reinstitute a system of activity support that provided greater implementation fidelity and included onsite support.

To begin SY 2022–2023, each SSIP PEA participating in Year 2, completed the Classroom Systems Walkthrough Survey, providing data on the existing walkthrough systems in their learning community. The survey contained questions and rating scales designed to collect information about the PEA's current structure and implementation of its walkthrough systems. Survey responses were assigned weighted point values, and a rubric was used to determine a differentiated level of support.

The most robust level of EBP Walkthroughs activity support included an onsite collaborative presentation and classroom walkthroughs with PEA SSIP Teams, and PEAs with survey results in the lowest tier were provided this level of activity support. PEAs with survey results showing moderate and strong walkthrough systems already in place were also encouraged to take advantage of our onsite collaborative presentation with classroom walkthroughs. However, they were also provided additional choices. PEAs with moderate walkthrough systems already in place were also offered the choice of a virtual collaborative presentation with subsequent classroom walkthroughs. In contrast, PEAs with robust walkthrough systems already in place were provided the third choice of the PEA SSIP Team reviewing the presentation and other support materials independently, with support as-needed, throughout the walkthrough process. Subsequently, a trend analysis of the EBP Walkthrough Tool data, along with EBP Survey results at the end of SSIP Year 2, will help to determine if the system of differentiated support also aligned with the fidelity of implementation and activity outcomes.

Data Structures - Organizing Internal and External Data for Analysis:

Another focus for ongoing infrastructure improvements has been collecting and analyzing data to engage stakeholders, guide process decisions, and inform progress toward the SiMR. Often, this process not only means collecting data internally but also incorporating external data that affects activity and student outcomes. The most concrete example of improving the data infrastructure can be seen through the alignment with Move On When Reading (MOWR).

Through a web portal, PEAs report grades K–3 literacy screener proficiency data for the all-students group to MOWR three times each year. Because a web portal has yet to become available for SSIP data collection, the SEA SSIP Team created the Literacy Screener Reporting (LSR) Form and modeled the format to the MOWR display portal. PEAs report grades 1–3 literacy screener proficiency data for the SWD group to SSIP on the LSR form three times each year.

However, when the SEA SSIP Team receives MOWR data spreadsheets that are generated from the web portal, the format of the data in the spreadsheet is different than what is displayed in the web portal. To streamline the data integration in SY 2022–2023, the SEA SSIP Team has aligned the format of the SSIP data spreadsheet to the MOWR reports rather than the format of the MOWR web portal. Rather than analyzing the data separately and comparing the results, new data can be incorporated into a common data table to analyze literacy outcomes.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Activity Form Structure - Success Gaps Rubric & Action Plan (SGR & AP):

In concert with PEA feedback, it became apparent that while there were obvious benefits to creating an SGR & AP activity form that allows for documentation on a single document throughout a PEA's time in SSIP, the possibility of adding up to five updates to an initial narrative for an SGR indicator Notes section would strain the limits of the available space for PEAs to document rich and cohesive narratives. Since providing additional form fields, several PEA SSIP Teams in Years 2–3 SSIP PEAs have expressed an appreciation for the improvement effort through correspondence and during meetings. As this form revision has only gone through one update period for Cohorts 4–5, the sustainability of this improvement effort will be most vividly apparent when Cohort 6 is in Year 3 of SSIP.

While PEAs have not reported an issue with changing the SGR & AP checkboxes to Y/N boxes for the accountability of fidelity, SEA SSIP Team specialists have reported confidence in completing the Fidelity Feedback Guide (FFG) with more reliability due to this improvement effort. The Y/N boxes were expected to increase the fidelity percentage on the FFG, and the FFG indicates a 6% increase in SY 2022–2023 fidelity compared to the previous year. Therefore, the change appears to be a contributing factor toward increasing fidelity. According to the SSIP Theory of Action, this data would also support the connection between activity fidelity and positive student outcomes. However, more time will be needed to see if the fidelity continues to increase or stabilizes at a high level and sustains this improvement effort.

Activity Support Structure - The SGR & AP and the Evidence-Based Practices (EBP) Walkthrough Process:

According to the SY 2022–2023 SSIP Survey, by providing the SGR & AP support videos as shorter videos that are targeted to the process and linked within the form directions, about 1 in every 4 PEAs reported finding this form of support useful to the process this year. Contrasting with the previous year, when the video was much longer and referenced as a resource that was available from the SSIP website, fewer than 1 in 10 PEAs reported finding the support videos useful. Therefore, providing the video format for support seems to have provided for the sustainability of systems improvement. This is especially notable because while all PEAs in Years 1–3 complete the survey, the support video is most highly targeted for use by Year 1 SSIP PEAs that have yet to complete the activity for the first time.

After providing a differentiated level of EBP Walkthrough Process support for the first time in SY 2022–2023, both personal feedback and feedback through the EBP Survey have shown very positive short-term outcomes for this system improvement effort. Over 85% of PEA SSIP Teams characterized the presentation itself, the knowledge and support of the SEA SSIP Team members, and the activity materials as mostly to highly supportive. Despite issues with timely survey completion and scheduling meetings, 100% of respondents reported finding the communication through

the process supportive. After the support, 87.5% of PEA SSIP Teams reported finding the process between slightly challenging and not challenging at all, and most PEA SSIP Teams reported choosing to use the walkthrough activity for expanded rollout. Providing differentiated support will allow the SEA SSIP Team the capacity to scale up support efforts. By continuing a high level of support for classroom walkthrough systems and classroom EBPs, the activity is expected to support positive student outcomes and achievement of the SSIP SiMR.

Data Structures - Organizing Internal and External Data for Analysis:

Although the SEA SSIP Team has only experienced the realignment of SSIP data collection structures to MOWR data reports for the Fall SY 2022–2023 literacy data submission, it is apparent that this infrastructure change will save a significant amount of time. The time-savings from no longer manually transferring data between the MOWR display portal and the spreadsheet, and the extra time spent on reliability checks between tables and through comparative analysis, can be put toward using the data. These activities include scaling up the data infrastructure by building a data dashboard, providing more robust outcome data to stakeholders, and using the data to inform more support opportunities for SSIP PEAs.
After the infrastructure change and with available data, the SEA SSIP Team has been able to look at data from the first year of collection of the SSIP Literacy Screener Reporting Form, in conjunction with MOWR data, to analyze initial trends.
At the fall submission of SY 2021–2022, grade 1 SWD in SSIP PEAs reported an average benchmark proficiency of 19.2% on literacy screeners, while the All-Student group in SSIP PEAs reported an average proficiency of 31.6%. This is a gap of 12.4% to begin the year between these two groups. At the spring submission of SY 2021–2022, the average proficiency of SWD in SSIP PEAs went up by 7.2% to 26.4%. The average proficiency of all students went up by 14.0% to 45.6%. This is a gap of 19.2% to end the year between these two groups. Therefore, the gap between SWD and all students in SSIP PEAs increased during grade 1 by 6.8% in SY 2021–22.
At the fall submission of SY 2021–2022, grade 2 SWD in SSIP PEAs reported an average benchmark proficiency of 15.9% on literacy screeners, while the All-Student group in SSIP PEAs reported an average proficiency of 38.3%. This is a gap of 22.4% to begin the year between these two groups. At the spring submission of SY 2021–2022, the average proficiency of SWD in SSIP PEAs went up by 5.6% to 21.5%. The average proficiency of all students went up by 10.9% to 49.2%. This is a gap of 27.7% to end the year between these two groups. Therefore, the gap between SWD and all students in SSIP PEAs increased during grade 2 by 5.3% in SY 2021–2022.
At the Fall submission of SY 2021–2022, grade 3 SWD in SSIP PEAs reported an average benchmark proficiency of 15.4% on literacy screeners, while the All-Student group in SSIP PEAs reported an average proficiency of 47.5%. This is a gap of 32.1% to begin the year between these two groups. At the spring submission of SY 2021–2022, the average proficiency of SWD in SSIP PEAs went up by 3.1% to 18.5%. The average proficiency of all students went up by 4.7%, to 52.2%. This is a gap of 33.7% to end the year between these two groups. Therefore, the gap between SWD and all students in SSIP PEAs increased during grade 3 by 1.6% in SY 2021–2022.
In analyzing the two trends, the initial data shows that while the grades progress with an increasing gap between SWD and all student groups in SSIP PEAs in SY 2021–2022, it does so at a decreasing rate:

SSIP Grade 1
Fall Gap: 12.4%
Spring Gap: 19.2%
Gap Increase: 6.8%

SSIP Grade 2
Fall Gap: 22.4%
Spring Gap: 27.7%
Gap Increase: 5.3%

SSIP Grade 3
Fall Gap: 32.1%
Spring Gap: 33.7%
Gap Increase: 1.6%

While data is not available for comparison to a non-SSIP SWD group or to see if the trend might continue toward gap reduction beyond grade 3, the available data provides a good baseline for analyzing ongoing trends through future submissions. After the fall submission of SY 2023–2024, the SEA SSIP Team will be able to use two full years of data to examine further ongoing trends with grade levels, student cohorts, and through summer periods. This data helps to support the SEA SSIP Team's decision to align with MOWR and adjust the SiMR to Grade 3 to begin SY 2021–2022, which also shifted the focus of systemic improvement toward K–3.

Did the State implement any _new_ (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)
YES

Describe each _new_ (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.
Disseminating Data - Activity and Student Outcome Presentations:

While activity and outcome data is shared with stakeholders when it becomes available, four accountability PowerPoint presentations that ranged from 10-16 slides in length were posted to the SSIP website for a more comprehensive review of SY 2021–2022 activity and student outcomes at the end of the year. The first presentation provided an overview of SSIP in SY 2021–2022. This included visual and narrative summaries of process revisions from stakeholder feedback, such as the implications of MOWR alignment and activity document improvements as well as data from both the SSIP and EBP Surveys. The second presentation used several forms of graphic representation to illustrate literacy outcomes for state and screener assessments and provide trend analysis by grade and cohort. The third and fourth presentations connected the activity process to activity outcomes for the SGR & AP and the EBP Walkthrough activities, respectively.
In addition to posting the presentations to the website and informing stakeholders, each PEA in Cohorts 3 and 4 received presentations that included additional individualized data slides. Since Cohort 3 had just completed its third and final year in SSIP, each PEA received an SGR & AP presentation that included activity outcomes for level of implementation and initiatives specific to their Cohort and learning community. Since Cohort 4 had just completed its second year in SSIP, each PEA received an EBP Walkthroughs presentation that included activity outcomes for overall and quadrant growth specific to their Cohort and learning community. Although there has been limited feedback from providing the presentations thus far, because the dissemination of data is of sound accountability practice and the data can be very useful to inform activities going forward, SSIP will more actively solicit feedback after providing the presentations at the culmination of SY 2022–2023 to ensure that the process and format of dissemination are of optimal usefulness to PEA SSIP Teams.

Activity Support Structure - Funding Initiatives through the SSIP Contract:

When PEAs in Year 1 complete their Fall SGR & AP submission, they can enter an SSIP Contract to support SSIP initiatives with reimbursement for aligned expenditures. However, before expenditures can be made, the PEA must provide the SEA with a statement of planned expenditures that can later be referenced for the maintenance of alignment. As planned expenditures were on a separate document, PEA and SEA SSIP Teams would need to keep track of both documents and their alignment over three years in SSIP.

In SY 2022–2023, SSIP accommodated for the financing structure of integrating the Contract Eligibility and Allowable Expenses (CEAE) into the SGR & AP. Now, as initiatives evolve, PEAs can manage their alignment within a single document. While initial feedback has been positive from stakeholders within and outside the SEA, as the process has yet to reach the first PEA submission of invoices, a substantive body of feedback and analysis of outcomes will be forthcoming and should be available to begin SY 2023–2024.

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

Activity Form Structure - Success Gaps Rubric & Action Plan (SGR & AP):

The SEA SSIP Team will monitor the integration of expanded narrative fields and Y/N boxes of the SGR & AP in the future, but from the progress and feedback of their inclusion so far, no further changes to these improvements are expected.

Activity Support Structure - The SGR & AP and the Evidence-Based Practices (EBP) Walkthrough Process:

While data showed that more PEAs used the videos and found them supportive in completing the activity in SY 2022–2023 than the previous year, more activity guidance can be provided in for Year 1 PEAs in SY 2023–2024. SSIP survey narratives included the request for the SEA SSIP Team to provide more examples of how a completed SGR & AP might look. As the videos provided these examples, and as the 16 Year 1 SSIP PEAs in Cohort 6 comprise 46% of all SSIP PEAs, it is possible that providing a different format for the guidance may yield a supportive-response rate that is closer to what would be all Year 1 SSIP PEAs finding the resources helpful toward activity completion. Therefore, the SEA SSIP Team will provide a document form of activity guidance with screenshots to pair with the video format. The SSIP Team will then use the SSIP Survey to see if the combination of formats improves feedback data.

Although the differentiated support that the SEA SSIP Team provided in SY 2022–2023 was an improvement that provided positive outcomes, there will be improvements to the setup process next year. Rather than waiting to collect data from the Walkthrough Systems Survey at the beginning of the year for Year 2 SSIP PEAs, the SEA SSIP Team provided this survey to Year 1 SSIP PEAs in December of this school year. The SEA SSIP Team will then be able to analyze the data before Year 2, allowing for a more digestible timeline of communication and scheduling with Cohort 6 at the beginning of SY 2023–2024. This will be especially necessary, as Cohort 6 has five more PEAs than Cohort 5.

Data Structures - Organizing Internal and External Data for Analysis:

Even though manual data transfer by the SEA SSIP Team from the SSIP Literacy Screener Reporting Forms to a data spreadsheet will be a part of the data collection process for the foreseeable future, the SEA SSIP Team will continue to explore the possibility of PEA access to a web portal for data entry and running reports in the future. After the analysis of preliminary data through the current structure, the SEA SSIP Team hopes to see that the alignment with MOWR and the shift in focus toward the foundational grades of literacy development results in a moderation and reversal of the increasing gap between the SSIP SWD and all student groups on literacy screener data. At the end of SY 2022–2023, the SEA SSIP Team will compare two years of this shift in focus, with two full years of literacy screener data and compare that to the Grade 3 SiMR. In addition, the SEA SSIP Team will continue collecting updated data, such as the October 1 Child Count, for inclusion in the creation of a data dashboard. The dashboard will allow the SEA SSIP Team to examine the movement of subgroup data in conjunction with student outcomes, as referenced in the SSIP Evaluation Plan.

Disseminating Data - Activity and Student Outcome Presentations:

While accountability practices would guide the SEA SSIP Team to continue providing stakeholders with activity and student outcome presentations both on the website and directly to stakeholders, the team will differentiate the SSIP Survey for Year 3 PEAs, to collect responses as to whether they reviewed the EBP Walkthrough presentations from the end of Year 2, and how they may have found it helpful toward informing their practices. This year, the presentations will also include the two-year data from the screeners and any available and relevant subgroup data. The SEA SSIP Team anticipates the presentations to yield more long-term commitment to the SSIP process when gains are seen by individual PEAs.

Activity Support Structure - Funding Initiatives through the SSIP Contract:

At the beginning of SY 2022–2023, because the CEAE form was not available before the completion of the SGR & AP, the form had to be provided to PEAs as a stand-alone document for the alignment to Action Plan initiatives and the approval of Planned Expenditures. Then, as CEAE forms were submitted and approved, the SEA SSIP Team could integrate the CEAE documents into each PEA's SGR & AP. Beginning at the SY 2022–2023 Spring submission, these PEA SSIP Teams will be able to manage the alignment between Planned Expenditures and Action Plan initiatives within the SGR & AP. Beginning at the SY 2023–2024 Fall submission, all Year 1 PEAs will have the CEAE document integrated into the SGR & AP to begin the year, fully streamlining the process. The SEA SSIP Team will create a guidance document for the process, will post the guidance document on the SSIP website, and include a link to the document within the directions of the CEAE.

List the selected evidence-based practices implement in the reporting period:

-The Success Gaps Rubric & Action Plan:
https://www.azed.gov/sites/default/files/2022/07/SSIP%20Success%20Gaps%20Rubric%20and%20Action%20Plan.doc
PEA SSIP Teams collaborate through 15 indicators, divided into five indicator groups. For each indicator, team members record evidence for practices in the learning community, decide upon current levels of implementation, and pursue initiatives to address needs.

--Indicator Group 1: Data-Based Decision Making
--- Decisions about curriculum, instructional programs, academic/behavioral supports, and school improvement are based on data.
--Indicator Group 2: Cultural Responsiveness
--- Culturally responsive instructional interventions and teaching strategies are used throughout the school or district.
--Indicator Group 3: Core Instructional Program
--- A consistent, well-articulated curriculum is in place and is implemented with fidelity, evidence-based practices, and differentiation.
--Indicator Group 4: Universal Screening and Progress Monitoring
--- Universal screening is used to identify needs for early intervention or targeted supports.
--Indicator Group 5: Interventions and Supports
--- Evidence-based behavioral interventions and supports are multi-tiered and implemented with fidelity.

-The EBP Diagnostic Walkthrough Process: https://www.azed.gov/sites/default/files/2022/07/SSIP%20EBP%20Walkthrough%20Tool.doc
PEA SSIP Teams use the EBP Walkthrough Tool, a collection of 104 classroom, evidence-based practices divided into four quadrants, to record observed practices. The data can then be used to not only celebrate instances where instructors exhibited an EBP but also to provide opportunities to further improve practices through such activities as peer observation and targeted professional development.
--Quadrant 1: Inclusive Learning Environment
---Classrooms exhibit an inclusive learning environment that is student-centered and engaging.
--Quadrant 2: Instructional Practices
---Classroom instruction is evidence-based, engaging, and responsive.
--Quadrant 3: Student Interactions
---Student interactions are collaborative and support learning objectives.
--Quadrant 4: Student Engagement
---Students are engaged in meaningful activities that support learning objectives.

Provide a summary of each evidence-based practices.

Indicator Group 1 of the SGR focuses on data-based decision-making. This includes making decisions about the school curriculum, instructional programs, academic and behavior supports, and school improvement initiatives, based on data. It also includes the use of screener and benchmark assessments, making decisions with subgroups in mind, and evidence of use from the administrative to classroom levels for the benefit of student outcomes.

Indicator Group 2 of the SGR focuses on cultural responsiveness. This includes celebrating diversity with professional development and during gatherings as well as supporting linguistic accessibility diversity with families in all correspondence and interactions.

Indicator Group 3 of the SGR focuses on implementing a well-articulated curriculum. This includes ensuring both horizontal and vertical alignment, flexible grouping, instructional technology, differentiated instruction with accommodations and modifications, providing for student learning styles and interests, instructional collaboration, professional development of curriculum and practices, implementation with fidelity, and informing families about the core curriculum and how it is differentiated for their student.

Indicator Group 4 of the SGR focuses on incorporating tools for universal screening and progress monitoring. This includes using universal screeners and progress monitoring tools for both academics and behavior, using benchmark assessments, and informing families about results.

Indicator Group 5 of the SGR focuses on practices involving interventions and supports. This includes a proactive and restorative, district-level discipline policy implemented responsively and with fidelity. It includes employing a multi-tiered system of supports for both academics and behaviors, guidance by screeners and diagnostic tools, and interventions that are continually monitored for progress by teachers who are trained to use resources and to operate with cultural sensitivity and fidelity within this system of supports. It also includes continually informing families about how their student fits within this system of supports.

Quadrant 1 of the EBP Tool focuses on classroom practices involving an inclusive learning environment. These include the display of measurable learning outcomes, classroom expectations, and word/sound walls that students can use toward learning goals, a classroom library that provides choices and reading accessibility, the use of manipulatives for connections to abstract concepts and relevance, and effective transitions between activities.

Quadrant 2 of the EBP Tool focuses on instructional classroom practices. These include "I Do" practices involving frontloading, adequate response wait times, and explicit-systematic explanations that incorporate a variety of learning modalities and fosters engagement. It includes "We Do" practices that involve scaffolding, providing immediate and specific feedback, informal formative assessment that is responsive prior to independent practice, and a variety of problem-solving methods. It includes "You Do" practices for responsive independent practice that include coaching, monitoring, and time for mastery. It also provides lesson closure that reviews learning targets and learning assessment.

Quadrant 3 of the EBP Tool focuses on student interaction in the classroom. This includes students engaging in various collaborative learning expressions, text activities, goal setting and planning, and higher-order learning modalities. It also has the ability for students to make choices and present learning in various ways.

Quadrant 4 of the EBP Tool focuses on student engagement in the classroom. This includes students involved in activities with real-world relevance that are targeted to the zone of proximal development, are considerate of strength and needs, involve self-regulation, and allow for a high degree of student-lead communication. Quadrant 4 also includes differentiated activities with accommodations and modifications to content and process.

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

Focusing on data-based decision-making allows PEAs to meet the needs of their learning community appropriately. This is not only done with data for general education but also for subgroups such as English language learners and special education students. It is only by the juxtaposition of both the aggregated and disaggregated data that administrators and teachers can make the most appropriate decisions, from curriculum to intervention and from the masses to the individual. Comprehensively and specifically using data to inform decisions is foundational for providing outcomes.

Focusing on cultural responsiveness allows PEAs to meet the needs of their learning community appropriately. As an individual's outcomes are a product of their learning, learning is a product of experiences, and culture is a critical component of a student's experiences. It is essential to respect the cultural similarities and differences of all members of the learning community. Cultural diversity within and amongst people is a crucial component of how they have learned and will continue to learn. Respecting this diversity allows students and stakeholders to feel appreciated, to buy into the learning community, and to be motivated to learn within it. It can also be used as a filter to understand perspective, which is the window to understanding what an individual needs to learn and develop. Beyond the inherent nature of language's importance in accessing learning, culture is also important. As it is essential to understand the learning needs of a student with disabilities, it is imperative to understand that individual's perspective and learning components, including how culture has guided and continues to guide the process of learning.

Focusing on implementing a well-articulated curriculum allows PEAs to meet the needs of their learning community appropriately. When the learning community develops a curriculum that accounts for the variety of learning components and equips the curriculum with tools that meet the variety of ways in which students learn, teachers can flexibly use that comprehensive framework to deliver that instruction with evidence-based practices to meet the

needs of learners in general and as individuals. The tools for differentiating the curriculum are essential for students with disabilities to provide access to the curriculum.

Focusing on the incorporation of universal screening and progress monitoring allows PEAs to meet the needs of their learning communities appropriately. By screening at several points through the year, members of the learning community have reliable data for growth and the development of foundational learning skills. The resulting data can then be used for comparison to prior learning and other groups/subgroups for the development of learning targets and toward the categorization and initial application of learning groups. Then after diagnostic and refinement where needed, the learning plan and progress can be monitored to make adjustments that provide for developmental precision and the highest potential for positive outcomes. This includes screening and monitoring for behavioral development as a factor for learning access and their outcomes.

Focusing on interventions and supports allows PEAs to meet the needs of their learning community appropriately. After reliable data is used to determine a student's needs, it is vitally important for the progression of learning to meet the more specific and involved needs with a structure and learning plan to meet those needs. While this may mean that a zone for optimal learning can be found within a small group structure, it may also mean that the zone for optimal learning can only be met through an individualized learning structure and plan. Meeting student needs includes having interventions and supports for behavioral development as a factor for learning access and their resulting outcomes.

Focusing on having an inclusive classroom learning environment allows teachers to meet the needs of the students in their classrooms appropriately. Much like respecting cultural diversity, an inclusive learning environment provides students the ability to feel appreciated, buy into the learning community, and be motivated to learn within it. It can also provide a support structure that offers learning accessibility and paves the way for improved outcomes.

Focusing on instructional classroom practices allows teachers to meet the needs of the students in their classroom appropriately. At the center of pedagogy, effective instructional practices include an intimate knowledge of subject matter, learning tools, and of students, from the individual members of the group to the dynamics of the group itself. Further, effective instructional practices involve a nuanced plan to meet these needs and a skillful implementation of scaffolding that also requires constant monitoring of feedback and adjustment throughout the process toward skill independence. Particular attention has to be paid to this arena of practices because of how multi-faceted, interconnected, and critical these practices are for positive student outcomes.

Focusing on student interactions allows teachers to meet the needs of the students in their classrooms appropriately. When students experience a variety of ways to interact with the learning process, content, materials, and with others, they can make cognitive connections and experience development to a greater degree. They also have more opportunities to make choices, take ownership of their learning, and experience drive toward positive outcomes.

Focusing on student engagement allows teachers to meet the needs of the students in their classroom appropriately. In connection with interactions, engagement also includes the identification of strengths and needs, and the skillful use of differentiation to meet those needs. Targeting these individual facets of learning will provide positive outcomes for individuals.

Describe the data collected to monitor fidelity of implementation and to assess practice change.

The Success Gaps Rubric & Action Plan (SGR & AP) - Activity EBPs:
The SEA Team has been using two primary avenues to monitor SGR & AP activity process and assess framework fidelity. After the fall submission of SY 2020–2021, the SGR & AP activity documentation was audited for the 11 most overlooked evidence-based practices. Where levels of implementation depended upon evidence-based practices such as the implementation of curriculum with fidelity, PEA SSIP teams addressed these practices in evidence narratives 34.1% of the time, on average. This was the driving force behind significant formatting revisions that included targeted evidence prompts before providing a level of implementation in SY 2021–2022, and more refining format revisions, such as changing evidence checkboxes to Y/N boxes in SY 2022–2023. While the significant format revisions resulted in PEA SSIP Teams addressing these 11 specific practices at an average of almost 80% in SY 2021–2022, the refining format revisions have resulted in PEA SSIP Teams addressing these practices at an average of 87.8% in SY 2022–2023.

The SGR & AP: Activity Process: SY 2021–2022 SGR & AP revisions also came with a companion document for providing PEA SSIP Teams feedback on framework fidelity, with the SGR & AP Fidelity Feedback Guide (FFG). After the initial Year 1 Fall submission, SEA SSIP Team Specialists use the FFG to review the SGR & AP for such elements as Rubric evidence being addressed, levels of implementation being provided, Action initiatives aligning to Rubric needs, and that PEAs target the unimplemented practices from the Rubric evidence within their targeted initiatives. In SY 2022–2023, the fall SGR & AP submission is up 6% to 94.2%.

The SGR & AP: Activity Outcomes: For an indication of not only fidelity of implementation and practice change, but also for the goal of systemic improvement and student outcomes as outlined in the SSIP Theory of Action, the SEA SSIP Team reviews growth in SGR levels of implementation for Cohorts that have completed three years in SSIP. For Cohort 3, this meant that the 12 PEAs pursued 36 AP initiatives across all five indicator groups and grew an average of 92% toward one full level of implementation.
The most targeted indicator group of the SGR for Cohort 3 was the Core Instructional Program group, comprising half of all Cohort 3 initiatives and growing an average of one full level of implementation during the three years in SSIP. For Cohort 3, it meant that almost every PEA that began SSIP in the Planning to Partially Implemented stages of a well-articulated curriculum, instruction based on research-based practices, and differentiated instruction reported either Full or Exemplary implementation before concluding SSIP. This connection between targeted initiatives and indicator growth would support fidelity of implementation, practice change, and systemic improvement.

The SSIP Survey: SGR & AP Activity Outcomes: Data to support fidelity of implementation and practice change also came from the SSIP Survey, an anonymous survey sent mid-year to all 35 PEAs in Years 1-3 in SSIP. In SY 2022–2023, when asked how the PEA SSIP Team would rate the outcomes of the Action Plan, every respondent reported at least some level of effectiveness from SGR & AP initiatives, while over 67.85% reported experiencing outcomes that were characterized as mostly or highly effective. When asked to expand the response, 82.6% of responses cited systemic improvement elements, such as collaborative planning with stakeholders, data-driven decision-making, improved support systems, and structures for planning and pursuing goals. 43.5% made a connection to outcomes such as an improvement in classroom practices, the professional development of staff, and student achievement.

The Evidence-Based Practices (EBP) Walkthrough Process - SiMR Alignment: The SEA SSIP Team monitors the activity process and assesses framework fidelity by looking at the alignment between the intended process elements connected to the SSIP SiMR and the actual process elements recorded on the EBP Walkthrough Tool. Guidance for these elements is provided before implementation through correspondence, within supporting resources, and during collaboration. In SY 2022–2023, the elements include walkthroughs being conducted within K-3 classrooms with SWD and the

walkthrough being conducted during literacy instruction. For the fidelity element of grade-level alignment to the SiMR, Cohort 4 submitted EBP Walkthroughs Tools that aligned 73.3% of submission 1 and submission 2 in SY 2021–2022. This was with only virtual support being offered due to COVID-19 restrictions. With the added structure to support PEAs with the EBP Walkthrough Process in SY 2022–2023, Cohort 5 submitted EBP Walkthrough Tools that aligned 93.6% of the time for submission 1 and submission 2. For the fidelity element of subject focus alignment to the SiMR, 100% of Cohort 4 submission 1 and submission 2 walkthroughs were conducted during literacy instruction in SY 2021–2022, while 95.5% of submission 1 and submission 2 walkthroughs were conducted during literacy instruction by Cohort 5 in SY 2022–2023. Both Cohort 5 PEAs that accounted for this modest drop in fidelity for instructional alignment conducted classroom walkthroughs during literacy instruction for submission 1, but then each switched one classroom to math instruction for submission 2. This fidelity issue will initiate improved guidance between submission periods from now on.

The EBP Walkthrough Process - Data Reliability: To balance capacity and data reliability concerns, PEAs are required to submit at least two completed EBP Classroom Walkthrough Tools at each of the three submission periods during Year 2, and two or more of the Tools contain data from a consistent classroom throughout the three submissions. In SY 2021–2022, Cohort 4 submitted two or more consistent walkthrough tools 90.5% of the time, and Cohort 5 submitted two or more consistent walkthrough tools 89.5% of the time in SY 2022–2023. While this was a slight drop in classroom alignment between last year and this year, most instances were reported as either the teacher being unavailable due to illness or a scheduling conflict.

The EBP Walkthrough Process - EBP Walkthrough Activity Outcomes: At the completion of Year 2 in SSIP, the SEA SSIP Team reviews the growth in evidence-based classroom practices during the school year as both a representation of activity outcomes and an indication of implementation fidelity. Looking at the difference between EBP Tools from the first to the final submission of the school year, for EBP Tools from the same SiMR-aligned classroom, Cohort 4 added an average of five evidence-based practices to each classroom by the end of Year 2 in SY 2021–2022. In comparison, Cohort 3 added an average of two evidence-based practices to each classroom by the end of Year 2, the previous year. However, for context, Cohort 3 data is less reliable because it was collected in a year when COVID-19 concerns caused many classrooms to vacillate between virtual, hybrid, and onsite instruction.

The EBP Survey - EBP Walkthrough Activity Outcomes: Data to support fidelity of implementation and practice change also came from the EBP Survey, an anonymous survey sent after submission 2 to the 11 PEAs in Year 2 of SSIP. When asked about the level of support provided by the SEA SSIP Team to complete the EBP Walkthrough through collaboration and resources, 90.5% characterized the support as mostly to highly supportive. Then, when allowed to describe any positive activity outcomes that PEA SSIP Teams experienced in connection to the EBP Walkthrough Process, PEAs described integrating peer observations into the process, providing targeted professional development based on the data, expanding the process to include classrooms beyond what is needed for SSIP submission, and experiencing growth in evidence-based classroom practices.

Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

The Success Gaps Rubric & Action Plan (SGR & AP): Yearly Targeted-Indicator Growth:

To monitor the progress of practice change and systemic improvement, the SEA SSIP Team looks at the growth of SGR implementation levels for indicators connected to AP initiatives after being implemented during the most recent one-year period. At the mid-year point of SY 2022–2023, this means looking at what PEA SSIP Teams are reporting for levels of implementation between the fall submission of SY 2021–2022 and the fall Submission of SY 2022–2023 for Cohorts 4 and 5. This data informs decisions, such as to continue using the evidence-based practices with the current level of support or to provide additional support to PEAs for improved progress and positive practice change.
Looking at the average difference of all 51 indicators that were targeted with initiatives by Cohorts 4 and 5 PEAs, 27 of the 51 indicators showed growth of at least one level of implementation between fall SGR submissions. However, looking at the cohorts separately, Cohort 4 reported only 8 of 25 indicators showing growth, while Cohort 5 reported 19 of 26 indicators showing growth.
Pertaining to initiatives that targeted Data-Based Decision Making indicator over the past year, one of three PEA SSIP Teams in Cohorts 4 reported growing one level of implementation. One of two PEA SSIP Teams in Cohorts 5 reported growing one level of implementation over the past year.
Pertaining to initiatives that targeted the Cultural Responsiveness indicator group over the past year, one of two PEA SSIP Teams in Cohorts 4 reported growing one level of implementation. Two of three PEA SSIP Teams in Cohorts 5 reported growing one level of implementation over the past year.
Pertaining to initiatives that targeted the Core Instructional Program indicator group over the past year, three of eleven PEA SSIP Teams in Cohorts 4 reported growing one level of implementation. Six of eight PEA SSIP Teams in Cohorts 5 reported growing at least one level of implementation over the past year, with two of those PEA SSIP Teams reporting growth of two levels over the past year.
Pertaining to initiatives that targeted the Universal Screening & Progress Monitoring indicator group over the past year, two of four PEA SSIP Teams in Cohorts 4 reported growing one level of implementation, with one of the Teams reporting two full levels of growth. Six of seven PEA SSIP Teams in Cohorts 5 reported growing at least one level of implementation over the past year, with two of those PEA SSIP Teams reporting growth of two levels over the past year.
Pertaining to initiatives that targeted the Interventions & Supports indicator group over the past year, one of five PEA SSIP Teams in Cohorts 4 reported growing one level of implementation. In contrast, four of six PEA SSIP Teams in Cohorts 5 reported growing one level of implementation over the past year.
While the data does indicate the level of progress that would substantiate continued use of these evidence-based practices, it also indicates significantly more moderate growth for Cohort 4 than Cohort 5. Therefore, the SSIP Team will continue to use this method of disaggregating the progress monitoring data by cohort to track the extent to which the growth difference is a product of different cohorts, or an indication of decelerated growth in targeted indicators between the first and second fall-to-fall submission periods.

The Evidence-Based Practices (EBP) Walkthrough Tool: Growth in Classroom Practices by Quadrant:

To monitor the progress of practice change and systemic improvement, the SEA SSIP Team looks at the growth in practices on the EBP Walkthrough Tool between submission periods in accordance with the SSIP Evaluation Plan. At the mid-year point of SY 2022–2023, this means comparing the recorded practices between the first EBP Tool submission in October and the second EBP Tool submission in December and comparing SY 2022–2023 for Cohort 5 to that of Cohort 4 during the previous year. For notable context, Cohort 4 showed an overall average decrease within every quadrant between submission 1 and submission 2, only to show a net increase in every quadrant after submission 3 in March of last year.
Looking at Quadrant 1 for an Inclusive Learning Environment in SY 2022–2023, each observed classroom in Cohort 5 averages 12.3 EBPs for submission 1 and 12 EBPs for submission 2. While this shows a slight decrease between submissions for Cohort 5 this year, Cohort 4 only reported an average of 7.9 EBPs per classroom in Quadrant 1, for submission 2. This would mean that in SY 2022–2023, Cohort 5 classrooms are averaging 4.1 more EBPs per classroom than Cohort 4 classrooms were at the same time last year.
Looking at Quadrant 2 for Instructional Practices in SY 2022–2023, each observed classroom in Cohort 5 averages 11.0 EBPs for submission 1 and 11.6 EBPs for submission 2. This shows a slight increase in the average practices per classroom for this quadrant in SY 2022–2023. In contrast, while Cohort 4 began the year by reporting an average of 4.2 more EBPs per classroom in this quadrant, they experienced a drop of 2.6 EBPs per classroom by submission 2. Cohort 5 now has the same average EBPs per classroom that Cohort 4 had for the second submission the previous year.

Looking at Quadrant 3 for Student Interactions in SY 2022–2023, each observed classroom in Cohort 5 averages 7.9 EBPs for submission 1 and 7.6 EBPs for submission 2. Although Cohort 4 also showed a decrease between submission 1 and submission 2 last year, the average EBPs per classroom in the quadrant began at an average of 9.2 EBPs, falling to 8.1 EBPs by submission 2. This would indicate that while the decrease in SY 2022–2023 was more modest, the Cohort 5 EBPs per classroom is behind Cohort 4 from the same time last year by an average of .5 EBPs.

Looking at Quadrant 4 for Student Engagement in SY 2022-23, each observed classroom in Cohort 5 averages 10.1 EBPs for submission 1 and 10.9 EBPs for submission 2. Compared to last year, while Cohort 4 began the year with an average of 10.7 EBPs per classroom by submission 1, the average fell to 8.4 EBPs per classroom by submission 2. This would indicate that in SY 2022-23, Cohort 5 is an average of 2.5 EBPs per classroom ahead of where Cohort 4 was for the quadrant last year at the same time.

Average Classroom EBPs by EBP Tool Quadrant for Submission 2 (December):

Cohort 4 in SY 2021–2022
Quadrant 1: 7.9
Quadrant 2: 11.6
Quadrant 3: 8.1
Quadrant 4: 8.4

Cohort 5 in SY 2022–2023
Quadrant 1: 12.0
Quadrant 2: 11.6
Quadrant 3: 7.6
Quadrant 4: 10.9

Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.

The Success Gaps Rubric & Action Plan (SGR & AP):

Despite all targeted indicator groups of evidence-based practices in the SGR & AP currently showing progress that exceeds one full level of implementation during SSIP, PEAs have reported modest progress for the Data-Based Decision Making indicator, as compared to other indicator Groups over the past three years. This relatively modest growth is occurring while the indicator is also showing a decreasing rate of being targeted with initiatives over this time. To bring awareness to this trend and toward the possibility of aligned initiatives, the SEA SSIP Team intends to disseminate this data, specifically targeting this indicator group in connection to the indicator group for Universal Screening and Progress Monitoring. The SEA SSIP Team will continue to collaborate with agency partners regarding opportunities for additional support and will continue to improve partnerships and look for professional development opportunities to support SSIP PEAs in practices for Data-Based Decision Making.

Although the evidence-based practices within the Cultural Responsiveness indicator group of the SGR & AP have shown improved progress over the past year, there has also been a significant increase in PEAs targeting these indicators with initiatives in SY 2022-23. In SY 2022-23, The SEA-SSIP Team will not only be looking for opportunities to support these PEA initiatives with professional development but also with funding. For example, six of the SY 2022–2023 initiatives to address Culturally Responsive practices come from 4 of the 16 PEAs in Cohort 6. Three of those four PEAs accepted the SSIP Contract, which can provide these PEAs with up to $5,000 to support the initiatives for Cultural Responsiveness. The SEA SSIP Team will then begin tracking not only SGR levels of implementation connected to AP initiatives but also the subgroup of targeted indicators being supported by SSIP Contract funding, compared to those not being funded for this and other indicator groups. If the SEA SSIP Team can show a connection between funding and initiative support and the progress in levels of implementation, this can then be disseminated to PEAs for the anticipated outcome of more SSIP PEAs pursuing SSIP Contract funding.

While PEAs continue to heavily target the Core Instructional Program indicator group of the SGR with AP initiatives, and while Cohort 3 targeted this group with a 60% share of initiatives as compared to other indicator groups, Cohorts 5-6 have targeted this indicator group with around a 30% share of initiatives. Despite the indicator group continuing to show good progress for practice change, this shift will be monitored. If PEAs begin to show inadequate progress, the SEA SSIP Team will highlight the connection between the lack of progress to a reduction in initiatives and would subsequently anticipate more PEA SSIP Teams pursuing Core Instructional Program initiatives as a result.

The indicator group for Universal Screening & Progress Monitoring of the SGR & AP has shown an increase in being targeted over the past few years and offers the most progress of any initiative group over the past year. To further augment the momentum from MOWR initiatives that appear to have already paid dividends to levels of implementation reported on the SGR, the SEA SSIP Team will begin analyzing MOWR Literacy Plans to look for initiative alignment opportunities with SSIP Action Plans. Where alignment exists, the SEA SSIP Team will highlight these opportunities for PEAs to work within the capacity and allow initiatives to leverage one another for improved outcomes.

PEAs have increased initiatives targeting the Interventions & Supports indicator-group for each of the past four cohorts and are now being targeted to the same extent as Core Instructional Programs for Cohort 6. With the increase in targeted initiatives, there has also been an increase in progress for the level of implementation. The SEA SSIP Team will continue to ensure professional development is available to support the initiatives that target the indicator group for further improvement of activity outcomes.

The Evidence-Based Practices (EBP) Walkthrough Process:

Regarding the evidence-based practices of the EBP Walkthrough Process, providing Year 2 PEAs with targeted support that includes onsite support in SY 2022–2023 has shown positive activity outcomes for implementation fidelity and progress to improve evidence-based classroom practices. The SEA SSIP Team will continue to pursue activity improvements, such as improving implementation fidelity by providing deliberate guidance to ensure PEAs conduct walkthroughs during literacy instruction. However, the PEA SSIP Team will continue to be aware of any revisions that would further stress the capacity of SSIP PEAs, especially during Year 2. While the EBP Survey respondents reported already feeling a high level of activity support in SY 2022–2023, 57.14% also reported going further than SSIP activity expectations for submission to include expanded rollout of walkthroughs, several also reported challenges to implementation that include staffing and time constraints. Therefore, the SEA SSIP Team will identify and look for opportunities to support PEAs with expanded rollout without scaling up the SSIP activity expectations. For example, for PEA SSIP Teams that can proceed with expanded rollout, the SEA-SSIP Team will add a section to the EBP Process Guide: After Walkthroughs document highlighting specific opportunities for EBP professional development and process-driven development data analysis. This addition should support activity outcomes without stressing capacity.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)
YES
If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

There is reliable data to support SSIP activities being implemented with significant fidelity, as evidenced by the increasingly high level of fidelity data connected to the SGR & AP and EBP Walkthrough activities and supported by intentional survey questions and positive survey responses. There is reliable data to support SSIP activities yielding positive outcomes, as evidenced by the improvement in SGR levels of implementation and EBP Walkthrough Tool classroom practices. According to PEA SSIP Team survey responses, the feedback indicates that PEAs experience positive activity outcomes and a high level of support through the SSIP Process. Lastly and most importantly, this evidence for systemic improvement shows a connection to positive student outcomes, as evidenced by the SiMR data.

Section C: Stakeholder Engagement

Description of Stakeholder Input

As data and other information became available after the close of the 2021–2022 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data.

Beyond SEAP, data from each indicator, including the State Systemic Improvement Plan, was reported to specific groups, such as special education directors and parents, during structured stakeholder sessions. Two one-hour sessions were included as part of ADE's monthly director forums, and three one-hour sessions were coordinated with Raising Special Kids (RSK), the state's Parent Training and Information Center. During these presentations, participants were encouraged to ask questions and were shown how to access the public comment page if they would like to provide relevant feedback.

For SSIP, stakeholders include all people who are invested in the outcomes for students with disabilities in SSIP PEAs. Stakeholders include, but are not limited to, individuals with disabilities, teachers, administrators, parents and family members of students with disabilities, intra-agency partners, interagency partners, officials for homeless assistance, representatives for foster care and juvenile facility placement, and SEA specialists. Stakeholder input includes collaborative efforts toward documenting and implementing activities and providing feedback, whether collected formally or informally, through correspondence or verbal discourse. Feedback may be received in the body of an email, during meetings, or through survey results.

Other than SEAP, as described above, the stakeholder groups that contribute toward the outcomes for students with disabilities include:

PEA SSIP Teams:

PEA SSIP Teams are typically comprised of 4–6 members of learning community leadership, often including the special education director, principals, and assistant principals, instructional specialists and coaches, and teachers in both special and general education. These PEA SSIP Teams are the primary stakeholders involved with the SGR self-assessment, the AP documentation and implementation, and in conducting EBP walkthroughs to collect and develop classroom practices. They meet monthly and quarterly to review initiative goals, available resources to meet those goals, how to mitigate or circumvent barriers to goal progress, and to use progress monitoring data to fortify or revise plans toward goals.

PEA SSIP Learning Community Members:

As the implementation of initiatives from the SGR and AP activity depends on a variety of stakeholders within PEA learning communities, they are integral SSIP stakeholders. This group includes not only administrators, but also school leadership, instructional coaches and specialists, teachers, support staff, and families. School principals are a primary source of feedback for the EBP survey.

Raising Special Kids (RSK):

RSK is Arizona's parent training and information center. As a conduit to parents and their perspectives, the RSK group assists with soliciting feedback on SSIP activities and outcomes.

Special Education Directors:

Special education directors are the leaders of PEA SSIP Teams, are members of SEAP, are the principal source of feedback at the Special Education Check-In meetings, and are the primary respondents of the SSIP Survey. They also provide continuous communication through the progress of SSIP activities as the primary contact for the SEA at PEAs.

Literacy Initiatives Work Group (LIWG):

Meeting quarterly, the LIWG is an opportunity for literacy development stakeholders between special and general education within the SEA to come together and share progress on agency initiatives, progress toward outcomes, professional development status, and alignment opportunities. The group includes members from K–12 Academic Standards, Exceptional Student Services (ESS) Professional Learning and Sustainability (PLS), Early Childhood Education, ESS Early Childhood, Assessment, ESS Program Support and Monitoring, and ESS Special Projects.

Move On When Reading (MOWR):

Arizona's MOWR policy is designed to provide students with evidence-based, effective reading instruction in kindergarten through third grade to position them for success as they progress through school, college, and career. MOWR is supported by state legislation that explains the requirements for pupil promotion, early literacy instruction, and accountability for student achievement in reading. Operating within ADE/Academic Standards, the SEA-MOWR Team collects literacy screener data and literacy plans for Arizona students in grades K–3.

ADE/ESS Program Support and Monitoring (PSM):

Specialists in ESS/PSM are the primary contacts between the SEA and PEA, involving initiating, submitting, and progressing through SSIP activities. They are also a source of ongoing feedback through all forms of communication and from monthly PSM meetings.

ADE/ESS:

ADE/ESS holds monthly meetings to share information and progress and to collect feedback from other perspectives within the SEA. The ESS group includes PSM, Professional Learning and Sustainability (PLS), Operations, Special Projects, Early Childhood Special Education, and Dispute Resolution. It also collaborates regularly with agency partners such as Assessment, Unique Populations, and K–12 Academic Standards.

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.

The SEA collects informal feedback continuously while collaborating with PEAs. Through ESS/PSM Specialists and the ESS/SSIP Coordinator, the SEA communicates directly with PEA Special Education Directors and PEA SSIP Teams before each activity submission and throughout the year whenever questions arise. Directors and PEA SSIP Teams collaborate toward documenting and implementing SSIP activities. PEA SSIP Teams then engage their learning community to become active stakeholders toward goals and outcomes.

Feedback from PEA learning communities is communicated through PEA SSIP Teams and special education directors and is collected through meeting notes and written correspondence. The feedback is aggregated and categorized into a document for continuous improvement. This information is presented to agency leadership during collaboration to determine if feedback would provide for activity and student outcomes and is actionable. If both criteria are met, the feedback is put into practice depending on when it is actionable. The SEA collects formal feedback through the SSIP and EBP Survey in early December of each year and surveys after presentations to stakeholder groups, such as the Special Education Check-In group, SEAP, and RSK. This feedback is then used toward continuous improvement efforts.

Interagency presentations are delivered quarterly to LIWG, SEA members within ESS, and PEA specialists within PSM. In addition to feedback toward activity improvements, collaboration within the SEA often includes opportunities to connect professional development with ongoing PEA initiatives from agency partners. PEAs are generally alerted to professional development opportunities from various SEA listserv emails but are specifically alerted when there is an opportunity to pair an expressed need from an action initiative with a professional development offering.

PEA SSIP Teams, Special Education Directors, and Learning Community Members: While special education directors are the primary contact for every communication between the SEA and PEA learning communities, PEA SSIP Teams are often included in the regular correspondence to discuss activity submission and progress. This collaborative structure is how key improvement efforts circulate from the SEA to PEA SSIP Teams and PEA learning communities and is the most consistent means of collecting feedback from PEA learning communities and PEA SSIP Teams for SSIP Improvements. Feedback is encouraged, recorded, shared with agency stakeholders, and continuously used toward SSIP improvement efforts. Annually, SSIP process and outcome information is disseminated to Special Education Directors and learning community members at the Director's Check-In and Special Education Check-In group. When presented with information that could be used toward strengthening the SSIP process, the group is polled about their experience and perspective. In conjunction with SSIP feedback, this helps to clarify the information and guide support in the SSIP Process.

SEAP: Annually, the SEA SSIP Team presents activity and student outcomes to SEAP. The SEA SSIP Team receives feedback on progress and process implementation through meeting and survey responses. Some examples of past feedback that has been collected and that has led to key SSIP improvements include the alignment with MOWR and setting six-year targets for progress toward the SiMR.

RSK: Annually, the RSK group allows the SEA SSIP Team to present activity and student outcomes to parents of students with disabilities and to solicit their feedback. In SY 2021–2022, to juxtapose the responses from PEA SSIP Teams on the four SGR indicators that pertain to family engagement, the SEA SSIP Team asked RSK attendees for their perspectives on the implementation of systems to inform and engage families. In SY 2022–2023, the SEA SSIP Team presented data showing that the average level of implementation for each of the four family engagement indicators has declined in the past two fall submission periods. This decline was accompanied by a significant increase in PEA SSIP Teams targeting each of these indicators with initiatives. The SEA SSIP Team then polled RSK attendees about their perspective on whether elements of family engagement were areas of strength or need for PEAs.

LIWG: In SY 2022–2023, the SEA SSIP Team has provided valuable support opportunities to PEA SSIP Teams through the collaboration that takes place at LIWG meetings. For example, the SEA SSIP Team has used updates from Academic Standards and Professional Learning and Sustainability on the progress of professional learning opportunities such as Language Essentials for Teachers of Reading and Spelling (LETRS) to address the statewide K–5 literacy endorsement initiative, in discussions with PEA SSIP Teams regarding Action Plan initiative alignment for evidence-based classroom practices.

ESS, ESS Leads, PSM, and PSM Leads: At monthly meetings, intra-agency stakeholders for the positive outcomes of students with disabilities come together to discuss all facets of supporting PEAs toward student growth, including literacy outcomes. Especially significant, these groups include the primary contacts for regular communication with PEA learning communities. Feedback toward improvement efforts often involves the consideration of PEA capacity, regularity and form of communication, and PEA community needs and concerns. In addition, there is collaboration between ESS members and units whenever different perspectives and ideas can be found as valuable to the progress of activities. For example, as one of the ESS units that provides trainings, resources, and technical assistance for evidence-based practices, the SEA SSIP Team collaborates closely with the SEA PLS Team. Members from each team share data and feedback and use the information to help guide the support provided to Arizona schools.

SEA/ESS Directors and Leadership: In addition to the continuous collaboration within ESS, ESS Teams that hold the primary responsibility for federal reporting present their indicator data and a summary of reporting information to ESS Leadership. This leadership includes ESS Leads, Directors, the Deputy Associate Superintendent (State Director of Special Education), and the Associate Superintendent. The presentation and subsequent discussions include a review of the historical data, targets, present levels, and the indication of slippage. If there is an indication of slippage, there is a collaboration amongst group members about the steps that need to be taken to address the slippage and to prevent slippage in the future.

ESS Projects: Every year, the SEA SSIP Team coordinates with ESS Projects on the distribution and approval of SSIP Contracts to support funding of SSIP initiatives. As Program Support and Monitoring (PSM) Specialists are not only members of the SEA SSIP Team but also the primary contact between the SEA and PEA on all monitoring activities, ESS Projects has begun including PSM Specialists on all correspondences in SY 2022–2023. This has kept contacts up-to-date and provided additional opportunities for support. In addition, the engagement of this important stakeholder toward integrating the CEAE form into the SGR & AP has been a key improvement effort.

Move On When Reading (MOWR): In the second year of alignment with MOWR in SY 2022–2023, the SEA MOWR Team is including the SEA SSIP Team on correspondence regarding MOWR literacy plans for SSIP PEAs. This has allowed for opportunities to provide additional support. For example, SEA SSIP Team members have incorporated initiatives documented in MOWR literacy plans into collaborative discussions with PEA SSIP Teams during EBP Walkthrough activity support meetings to highlight initiative and activity alignment.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)

YES

Describe how the State addressed the concerns expressed by stakeholders.

Special Education Check-In Group:

In SY 2021–2022, the SEA SSIP Team presented SSIP activity and student outcomes to stakeholders at the monthly Special Education Director's Check-In meeting. While sharing activity outcomes, the SEA SSIP Team relayed SSIP Survey data regarding collaboration between Special Education (SpEd) and General Education (GenEd) and polled the Check-In group about their experience regarding collaboration. 71% of respondents characterized collaborating with GenEd as no more than occasionally when setting goals, planning instruction, and monitoring student progress.

After being renamed the Special Education Professionals Check-In group for greater inclusivity, the SEA SSIP Team again presented to this group of stakeholders in SY 2022–2023. The SEA SSIP Team relayed polling response data from the previous year, and according to this year's SSIP Survey, PEA SSIP Teams reported a higher level of collaboration between SpEd and GenEd, as opposed to the survey reporting from last year. Then, a poll was delivered to collect responses on the Check-In group's collaboration experience between the previous year and this year. Respondents reported an average 10.4% increase in collaboration this year, as opposed to last year. While the highest increase was in collaboration pertaining to communicating with families, over 13% of respondents reported experiencing increased collaboration regarding the planning of instruction. While this trend in collaboration is positive, the level of collaboration between SpEd and GenEd would still be a concern, especially with activities centered around planning instruction. This continuing concern was reinforced by a participant who asked about professional development opportunities to improve collaboration between Special and General Education.

At the conclusion of the January 2023 Special Education Check-In Group Meeting, to pair with general guidance toward the ESS website and professional development opportunities, the Director of Professional Learning and Sustainability (PLS) cited the Arizona Professional Learning Series (AzPLS) as a specific opportunity for collaborative development. AzPLS covers a series of modules that helps to create systems change and increase literacy achievement through collaborative team structures. The SEA SSIP Team shared survey results with PLS members, and PLS members shared data showing how prior PEA AzPLS Teams have reported improvements in collaboration between GenEd and SpEd, resulting from participation in AzPLS. PLS members then shared plans for AzPLS scale-up, including the official launching of an informational website and sharing information through the ESS Special Education Directors listserv in the Spring of 2023. AzPLS plans on sharing components of the Series at the IDEA Conference and is building capacity to begin a new Cohort for participation in the Fall of 2023. The SEA SSIP Team will look for initiative alignment and reach out to PEAs through the SSIP Process. The SEA SSIP Team will add a question to the SSIP Survey pertaining to the literacy screener reporting activity to collect more information. The question will focus on how SpEd uses the data to collaborate with GenEd toward setting goals and planning instruction.

Professional Learning and Sustainability (PLS):

A concern arose when the SEA SSIP Team discovered and shared data showing that while the SGR & AP indicator group with the highest average level of implementation in SY 2021–2022 was Universal Screening and Progress Monitoring, the lowest average level came from Data-Based Decision Making. In conjunction with other data and feedback being shared, this divide between having systems in place to collect data and having systems in place to make data-driven decisions became a concern for supporting PEAs with data literacy.

The SEA SSIP Team will continue to follow the data relationship between assessment and data-driven decision-making. Cohort 6's first SGR & AP submission in SY 2022–2023 shows a considerably higher average level of implementation for Data-Based Decision Making relative to Universal Screening and Progress Monitoring, which is a positive development at the initial stages of monitoring the data. The SEA SSIP Team will continue to provide PEA SSIP Teams with information about support mechanisms when there is AP initiative alignment to needs, such as the components of data-driven decision making within AzPLS, and the online modules and webinars being provided about Data-Based Individualization by the National Center on Intensive Intervention. The SEA SSIP Team will add a question to the SSIP Survey pertaining to the literacy screener reporting activity to collect more information. The question will focus on how the PEA learning community uses the data to drive program and instructional decisions.

RSK:

From the RSK poll, there were over 1.5 times the number of responses for areas of need as there were for areas of strength. Of the strengths, although providing family language services garnered the most responses of any category by English language respondents, it did not receive any responses by Spanish language respondents, although Spanish language respondents were a small sample set. In comparison to the area of strength, the most lopsided areas of need was in the practice of informing families about supports and services, such as special education and intervention, with three times the number of responses for need than strength. In contrast, the most significant drop in implementation over the past three fall submission periods, and the lowest average of the four overall, was for practices of families feeling welcomed and engaged, pertaining to cultural responsiveness. Both RSK respondents and PEA SSIP Teams aligned with their perspective that providing improved practices for families to be informed and engaged has become a need. Since PEA SSIP Teams have also increased the targeting of these indicators with initiatives, from 8 initiatives in SY 2021–2022 Fall to 17 initiatives in SY 2022–2023 Fall, the trend in the level of implementation will continue to be tracked and reported in the future. Of RSK respondents indicating a need to be informed about supports and services, such as special education and intervention, ESS will be providing a presentation on facilitated IEPs to the RSK group. The presentation will continue to bring awareness to this option for parents toward collaborative and student-focused IEP Teams being equipped to make sound decisions in the development of IEPs. In addition, for use at a future meeting, a poll will be developed to target what part of the process of providing supports and services about which families feel a further need to be informed. For example, the SEA SSIP Team will ask the extent to which the need exists when receiving services, evaluation, and understanding child find, during the IEP process or during SpEd or intervention services.

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

Activity Support for Fidelity - Success Gaps Rubric & Action Plan (SGR & AP):

Referencing the SSIP Evaluation Plan for Data Reliability, the SEA SSIP Team intends to provide additional support for PEAs on completing SGR & AP submissions, to improve framework and implementation fidelity further. Preliminarily, the SEA SSIP Team will provide an overview of the SGR & AP process and support materials before PEAs begin Year 1 in SSIP.

After each submission of the SGR & AP, the SEA SSIP Team provides feedback to PEA SSIP Teams using the Fidelity Feedback Guide (FFG). Currently, however, the system offers more specific feedback for the initial completion in Year 1 and then more generalized feedback after that. After looking at the progression of feedback and subsequent submission, it has been determined that while most PEA SSIP Teams use the feedback toward subsequent activity completion with improved fidelity, some PEA SSIP Teams may need more support to show evidence of using the feedback.

For SY 2023–2024, the SEA SSIP Team will provide PEAs with an FFG that includes more specific feedback for subsequent submissions, according to the most significant trends in missing fidelity elements and within the expectations that were provided on the initial SGR & AP submission. In addition, the SEA SSIP Team will track the connection between the FFG and improved fidelity and schedule SGR & AP meetings with PEA SSIP Teams in Year 2 that have not shown improvement in fidelity, according to the data. The fidelity issues will be reviewed, and subsequent fidelity data will be tracked.

Data Structures - Incorporating External Data Sources for Analysis and Display:

In addition to data that informs the connection between activity and student outcomes, the SSIP has begun collecting data from variables that could also influence outcomes for students in SSIP PEAs. This includes a structure for the yearly incorporation of October 1 Child Count data for disability by category and least restrictive environment designations. The data would also include variables such as race/ethnicity, English Language, income eligibility, geographic area, recruitment and retention survey results, and the incidence of PEAs that also carry a Targeted Support and Improvement designation. The SEA SSIP Team will create a data dashboard to display the data, disseminate the information to internal stakeholders, and explore the usefulness of the data and display format.

Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.

SGR & AP Support:

The SEA SSIP Team will revise the subsequent submission portions of the FFGs in February of 2023 and replace the existing sections before SGR & AP reminders go to PEA SSIP Teams at the beginning of March. Also, in February, and not contingent on the revised forms due to expectation maintenance, PEA SSIP Teams with ongoing fidelity issues will be contacted and scheduled for a brief review of fidelity data. Subsequent fidelity data will be collected in April of 2023 to assess the expected improvement of fidelity.

Data and Display:

The SEA SSIP Team anticipates being able to receive and analyze a reliable datasheet of FY23 October 1 data in February of 2023, begin building a data dashboard with the incorporation of other subgroup data in March 2023, and be able to present the data to internal stakeholders starting in April or May 2023. Through analysis and feedback, if any data is agreed upon as relevant to such activities as disseminating the information externally, strengthening stakeholder relationships, or revising process activities, the SEA SSIP Team would explore the possibility of pursuing these activities through the months of May–July and before the beginning of SY 2023–2024.

Describe any newly identified barriers and include steps to address these barriers.

SGR & AP Support:

The notable barrier to conducting the SGR & AP fidelity meetings will be the capacity of both SEA and PEA SSIP Teams. This barrier will be moderated by the fidelity meetings before the spring submission rather than before the fall submission. In addition, SEA SSIP Teams will only schedule a few of the PEA SSIP Teams with the lowest fidelity at first and then expand the process to include other teams if the process proves efficient and effective.

Data and Display:

The data project will produce a sizable amount of data to process. Barriers will include incorporating the data into a common format, organizing the data for substantive analysis, and creating a dashboard that provides for substantive analysis from various perspectives. It will be a challenge to isolate the variables that may have the greatest effect on practice change and student outcomes. It may also be a challenge to align activities and relationships that affect these variables. For example, suppose two different stakeholder groups have their own processes and evidence to support those processes. In that case, even if data shows that aligning those processes may provide for capacity concerns and leveraging outcomes, change may elicit resistance to alignment.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Certification

Instructions

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

Certify

I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role:

Designated by the Chief State School Officer to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.

Name:

Alissa Trollinger

Title:

Deputy Associate Superintendent, Exceptional Student Services

Email:

alissa.trollinger@azed.gov

Phone:

602-364-4004

Submitted on:

04/27/23 7:46:25 PM

Determination Enclosures

RDA Matrix

2023 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination[1]

Percentage (%)	Determination
69.44%	Needs Assistance

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	24	16	66.67%
Compliance	18	13	72.22%

2023 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	91%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	88%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	25%	2
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	93%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	25%	1
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	86%	1

Math Assessment Elements

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	92%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	88%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	38%	1
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	93%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	18%	1
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	87%	1

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[1] For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B."

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	27	0
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	72	1

*Due to privacy concerns the Department has chosen to suppress this calculation.

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. § 300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2023 Part B Compliance Matrix

Part B Compliance Indicator[2]	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	NVR	N/A	0
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	97.18%	NO	2
Indicator 12: IEP developed and implemented by third birthday	99.63%	YES	2
Indicator 13: Secondary transition	65.17%	NO	0
Timely and Accurate State-Reported Data	96.15%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			1
Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

Data Rubric

FFY 2021 APR[3]

APR Indicator	Part B Timely and Accurate Data -- SPP/APR Data	
	Valid and Reliable	**Total**
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	0	0
4B	0	0
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
	Subtotal	19
APR Score Calculation	**Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	24

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[3] In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

		618 Data[4]		
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 4/6/22	1	1	1	3
Personnel Due Date: 11/2/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Discipline Due Date: 11/2/22	1	1	1	3
State Assessment Due Date: 12/21/2022	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
MOE/CEIS Due Date: 5/4/22	1	1	1	3
			Subtotal	21
618 Score Calculation			Grand Total (Subtotal X 1.23809524) =	26.00

[4] In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation	
A. APR Grand Total	24
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	50.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator*) =	0.9615
E. Indicator Score (Subtotal D x 100) =	96.15

*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.

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APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part B 618 Data

1) Timely –   A State will receive one point if it submits all EDFacts files or the entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	1st Wednesday in April
Part B Personnel	C070, C099, C112	1st Wednesday in November
Part B Exiting	C009	1st Wednesday in November
Part B Discipline	C005, C006, C007, C088, C143, C144	1st Wednesday in November
Part B Assessment	C175, C178, C185, C188	Wednesday in the 3rd week of December (aligned with CSPR data due date)
Part B Dispute Resolution	Part B Dispute Resolution Survey in EMAPS	1st Wednesday in November
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	1st Wednesday in May

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to EDFacts aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in EMAPS. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

Dispute Resolution

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

https://sites.ed.gov/idea/how-the-department-made-determinations/